

## **NOTICE OF PROPOSED ACTION**

### **Title 10: Bureau of Real Estate Appraisers**

NOTICE IS HEREBY GIVEN that the Bureau of Real Estate Appraisers (“Bureau” or “BRE”) is proposing to take the action as described in the Informative Digest. Any person interested may present statements or arguments orally or in writing relevant to the action proposed at a hearing to be held at:

Department of Consumer Affairs  
1747 North Market Blvd.  
1st Floor Hearing Room  
Sacramento, CA 95834

Date: April 3, 2017

Time: 10:00 a.m.

Written comments, including those sent by mail, facsimile, or e-mail to the addresses listed under Contact Person in this Notice, must be received by the Bureau at its office not later than 5:00 P.M., on March 31, 2017, or must be received by the Bureau at the hearing. The Bureau upon its own motion or at the instance of any interested party may thereafter adopt the proposals substantially as described below or may modify such proposals if such modifications are sufficiently related to the original text. With the exception of technical or grammatical changes, the full text of any modified proposal will be available for 15 days prior to its adoption from the person designated in this Notice as contact person and will be mailed to those persons who submit written or oral testimony related to this proposal or who have requested notification of any changes to the proposal.

#### **AUTHORITY AND REFERENCE:**

Pursuant to the authority vested by sections 114.5, 115.5, 11313, 11314, 11324, 11340, 11341, 11350, 11352, 11360 and 11361 of the Business and Professions Code and to implement, interpret or make specific sections 11320.5, 11340, 11341, 11343, 11344, 11345, 11345.05, 11345.1, 11345.2, 11345.3, 11350, 11351, 11360, 11361, 11401, and 11408 of the said Code and sections 11361.5 and 11361.7 of the Health and Safety Code, the Bureau is considering changes to sections 3525, 3527, 3561, 3569, 3570, 3575, 3602, 3603, and 3681, Title 10 of the California Code of Regulations as described in this Notice.

## **INFORMATIVE DIGEST/POLICY STATEMENT OVERVIEW**

The Bureau currently has forms concerning: license upgrade; renewal; initial; temporary practice; change notification; appraisal management company (“AMC” controlling person application; AMC renewal; AMC change form; AMC renewal; and reciprocal license. The Bureau proposes to amend these forms by including required statutory language, improving the clarity of questions, and making various other changes and improvements. The Bureau seeks to revise licensure application forms: REA 3001 (Rev. 1/1/17); REA 3012 (Rev. 1/1/17); REA 3023 (Rev. 1/1/17); REA 5002 (Rev. 1/1/17); REA 3025 (Rev. 1/1/17); REA 5012 (Rev. 1/1/17); REA 5011 (Rev. 1/1/17); REA 3011 (Rev. 1/1/17); REA 3009 (Rev. 1/1/17); and create a new form REA 5013 (Rev. 1/1/17). The aforementioned forms are being incorporated by reference.

## **ANTICIPATED BENEFITS**

The benefit of the proposed regulation will be to ensure compliance with existing law. Currently, the Bureau’s licensure applications do not inquire about military status. Revising the Bureau’s licensure applications will benefit applicants by allowing the Bureau to ascertain their military status to expedite their application.

Additionally, applicants will benefit from the exclusion of questions concerning certain minor marijuana possession convictions. Currently, the Bureau’s applications do not advise applicants they do not need to disclose certain minor marijuana possession convictions. The revised questions make it clear that such convictions do not need to be disclosed.

Furthermore, consumers will benefit from the clarification of questions and instructions. This will make the application process easier to complete.

## **CONSISTENCY AND COMPATIBILITY WITH EXISTING STATE REGULATIONS:**

During the process of developing these regulations, the Bureau has conducted a search of any similar regulations on this topic and has determined that there is no reasonable interpretation of any state regulation that is inconsistent or incompatible with the proposed action.

## **INCORPORATION BY REFERENCE**

The Bureau seeks incorporate by reference the following forms: Initial Application (Form 3001) Rev. 1/1/17; Renewal Application (Form 3012) Rev. 1/1/17; Upgrade Application (Form 3023) Rev. 1/1/17; AMC Controlling Person Application (Form 5002) Rev. 1/1/17; Reciprocal License Application (Form 3025) Rev. 1/1/17; AMC Renewal Application (Form 5012) Rev. 1/1/17; AMC Change Notification and Miscellaneous Requests (Form 5011) Rev. 1/1/17; Change Notification and Miscellaneous Requests (Form 3011) Rev. 1/1/17; Request for Temporary

Practice Permit (Form 3009) Rev. 1/1/17 and create a new form entitled Appraisal Management Company Controlling Person Renewal Questionnaire (Form 5013) Rev. 1/1/17.

### **FISCAL IMPACT ESTIMATES**

Fiscal Impact on Public Agencies Including Costs or Savings to State Agencies or Costs/Savings in Federal Funding to the State: None

Nondiscretionary Costs/Savings to Local Agencies: None

Cost to, or mandate imposed on, any Local Agency or School District for Which Government Code Section 17500-17630 Require Reimbursement: None

Business Impact: The Bureau has made an initial determination that the proposed regulatory action would have no significant statewide adverse economic impact directly affecting business, including the ability of California businesses to compete with businesses in other states.

As part of its Economic Impact Analysis, BREa has determined that this proposal will not affect the ability of California businesses to compete with other states by making it more costly to produce goods or services.

Impact on Jobs/New Businesses: None

Cost Impact on Representative Private Person or Business: The agency is not aware of any cost impacts that a representative private person or business would necessarily incur in reasonable compliance with the proposed action.

Effect on Housing Costs: None

Effect on Small Businesses: The Bureau has determined that the proposed regulations will not affect small businesses. The Bureau made this determination because the minimum requirements for licensure and registration are not changing with these form. Instead, the forms are including statutorily required questions, clarifying questions, and making the form easier to use and more clear.

### **RESULTS OF THE ECONOMIC IMPACT ASSESSMENT**

Impact on Jobs/New Businesses: The Bureau has determined that this regulatory proposal will not have a significant impact on the creation or elimination of jobs, new or existing businesses, or the expansion of businesses in the State of California.

Benefits: The benefits will be compliance with the law and easier to use forms.

Occupations/Businesses Impacted: The proposed regulation will not have an occupational/business impact.

Reporting Requirements: The proposed regulation does not set forth any new reporting requirements.

Comparable Federal Regulations: None

### **CONSIDERATION OF ALTERNATIVES**

The Bureau must determine that no reasonable alternative considered by the Bureau or that has otherwise been identified and brought to the attention of the Bureau would be more effective in carrying out the purpose for which the action is proposed, would be as effective and less burdensome to affected private persons than the proposed action, or would be more cost-effective to affected private persons and equally effective in implementing the statutory policy or other provision of law.

Any interested person may present statements or arguments orally or in writing relevant to the above determinations at the above mentioned hearing.

### **INITIAL STATEMENT OF REASONS AND INFORMATION**

The Bureau has prepared an initial statement of reasons which contains the purpose, rationale, and necessity for the proposed action.

The proposed text, this notice, the statement of reasons, and any other relevant documents are on the Bureau's website at [www.brea.ca.gov](http://www.brea.ca.gov). Click the "Laws" tab at the top of the page. Under the heading "Rulemaking Notifications" find the docs associated with this rulemaking subject: "Form Revisions."

### **AVAILABILITY AND LOCATON OF THE STATEMENT OF REASONS, TEXT OF PROPOSED REGULATION AND RULEMAKING FILE**

All the information upon which the proposed regulations are based is contained in the rulemaking file which is available for public inspection by contacting the person named below. As of the date this notice is published in the Notice of Register, the rulemaking file consists of this notice, the proposed text of the regulation and the initial statement of reasons. Copies may be obtained by contacting person named below or by accessing the website as provided above.

### **AVAILABILITY OF CHANGED OR MODIFIED TEXT**

After holding the hearing and considering all timely and relevant comments received, BREa may adopt the proposed regulation substantially, as described in this notice. If BREa makes modification which are sufficiently related to the originally proposed text, it will make the modified text (with the changes clearly indicated) available to the public for at least 15 days before BREa adopts the regulations as revised. Please send requests for copies of any modified regulation to the attention of the contact person named below. BREa will accept written



comments on the modified regulation for 15 days after the date on which they are made available.

### **AVAILABILITY OF THE FINAL STATEMENT OF REASONS**

Upon its completion, copies of the Final Statement of Reasons may be obtained by contacting the person named below.

### **CONTACT PERSON**

Inquiries or comments concerning the proposed rulemaking action may be addressed to:

Kyle Muteff, Legal Counsel  
1102 Q Street, Suite 4100  
Phone: 916-341-6126  
FAX: 916-440-7406  
[kyle.muteff@orea.ca.gov](mailto:kyle.muteff@orea.ca.gov)

The backup person is:  
Thu Tran  
1102 Q Street, Suite 4100  
Phone: 916-440-7876  
FAX: 916-440-7406  
[Thu.Tran@orea.ca.gov](mailto:Thu.Tran@orea.ca.gov)

**Bureau of Real Estate Appraisers  
Initial Statement of Reasons**

**Hearing Date:** April 3, 2017

**Subject Matter of Proposed Regulations:** Form Updates

**Sections Affected:** Amend Section 3525, 3527, 3561, 3569, 3570, 3575, 3602, 3603, and 3681 of Title 10 of the California Code of Regulations.

**Background/Problem Addressed**

Senate Bill 1159 (Lara, Chapter 752, Statutes of 2014) amended section 30 of the Business and Professions Code. No later than January 1, 2016, the Bureau of Real Estate Appraisers (BREA or the Bureau) must require either the individual taxpayer identification number or social security number if the applicant is an individual.

Assembly Bill 1904 (Block, Chapter 399, Statutes of 2012) added section 115.5 to the Business and Professions Code requiring boards and bureaus within the Department of Consumer Affairs (DCA or Department) to expedite the licensure process for applicants who are either married to, or in a domestic partnership with, an active duty member of the Armed Forces of the United States of America assigned to an active duty station in this state under official duty military orders.

Assembly Bill 1057 (Medina, Chapter 693, Statutes of 2013) added section 114.5 to the Business and Professions Code requiring all boards and bureaus within DCA to inquire on every application for licensure if the individual applying for licensure is serving in, or has previously served in, the military.

Under the Uniform Controlled Substances Act, convictions for certain marijuana charges need not be reported on applications. Section 11361.5 of the Health and Safety Code requires the destruction of records for certain marijuana possession charges two years after the conviction. Pursuant to section 11361.7(b) of the Health and Safety Code, the Bureau cannot deny or limit a license based on certain marijuana convictions if the conviction is more than two years old. Section 11361.7 has caused the Bureau to rewrite its application questions regarding convictions to specifically state convictions obtained pursuant to Health and Safety Code section 11357 are excluded from the disclosure requirement. Forms 3001, 3012, 3023, 5002, 3025, 5012, and 5013 conviction questions have been rewritten.

The Bureau seeks to revise the following forms: 3001, 3012, 3023, 5002, 3025, 5012, 5011, 3011, 5013, and 3009 from title 10 of the California Code of Regulations sections 3525, 3527, 3561, 3569, 3570, 3575, 3602, 3603, and 3681 in order to implement the requirements set forth above, and provide clarifying information and general updates.

## **Factual Basis/Rationale**

Pursuant to Business and Professions Code section 11313, the Bureau Chief shall adopt regulations as are determined reasonably necessary to carry out the purposes of the Real Estate Appraisers' Licensing and Certification Law. Due to the number of forms and changes being proposed, each form will be addressed separately and will explain the reason for all the information on the form.

## **Form 3001 Initial Application**

### **1. Logo, Governor, and Name Change to Bureau.**

The top of the form includes the following information: the name of the current Governor, BRE's logo, and BRE's contact information. This information is being provided to verify that the applicant is using an authentic BRE form and to provide applicants with BRE's contact information. The top banner also includes the State of California seal, which is used on all BRE forms, and a box for BRE's use only in order for staff to process the document.

### **2. Title.**

The application is entitled "Initial License Application" as this is the initial application needed to receive a license.

### **3. Opening Instructions.**

The form begins with bullet points of instruction. This is to provide the applicant with some basic information before they begin to complete the form, including: an advisement to fill the form out clearly and in dark ink, how fees must be paid, that fees are non-refundable, that out-of-state licensees must complete an additional form and the form they are required to use, that examination fees are paid to the test center directly at the time of the examination, a telephone number to call if the applicant has questions, the mailing address where the completed application must be sent, and a website where all fees are located. This information is included at the beginning of the application because BRE has learned that this is the information most applicants need before completing the main parts of the application.

### **4. Part A – Applicant Information.**

#### **a. Military Questions.**

- i. Business and Professions Code section 114.5 requires BRE to inquire whether the applicant is serving or has served in the military. If so, the application will be expedited. In addition, Business and Professions Code section 115.5 requires BRE to expedite the licensure process for an applicant that is married, in a

domestic partnership or other legal union with a person who is assigned to active military duty in the State. These questions must be asked to determine if the application should be expedited.

b. Application Level.

- i. There are four levels of licensure with BREa. This question asks the applicant which level the applicant is applying to receive.

c. Name, Gender, Height, Weight, Eye Color, Hair Color, Birthdate, Drivers License Number, Social Security or Taxpayer Identification Number.

- i. These questions are asked to verify the identity the applicant and remain unchanged from the previous Initial Application form, except for the Taxpayer Identification Number. The Taxpayer Identification Number is being requested as an alternative to providing a social security number pursuant to Business and Professions Code section 30.
- ii. The date of birth is requested to verify the applicant's age pursuant to Business and Professions Code section 11340(e), which indicates that a license may not be issued to an individual under the age of 18.

d. Business Name.

- i. California Code of Regulations section 3527 requires all applicants to provide and update their business name.

e. Mailing Address (Address of Record).

- i. California Code of Regulations section 3527 is proposed to be amended to simplify the address of record for applicants, licensees and registrants. Currently, an applicant's business address is their address of record, unless otherwise requested. However, if no business address is provided, the mailing address is the address of record. This has resulted in applicant and licensee confusion regarding what their address of record is. It is important to clarify and simplify this issue to help ensure that applicants, licensees, and registrants are aware that the address they provide will be a public record and that the address they provide is where all official communication from BREa will be sent. In an effort to simplify this issue, BREa proposes to amend California Code of Regulations section 3527 to ask for only one address, which will be the address of record.

f. Business and Residence Telephone Number.

- i. California Code of Regulations section 3527 requires that applicants provide business and residence telephone numbers. The Bureau proposes to remove "Residence address" from section 3527 as it is not needed to license an individual. Further, there can be confusion from Bureau staff as to which address to send official documents. Removing the unnecessary residence address removes that problem. Similarly, the Bureau proposes to streamline section 3527(c) to simply state the mailing address is the address of records. This will provide the Bureau with the necessary information to serve the applicant and licensee with documents

while eliminating unnecessary addresses. Subsection (c) is also being amended to simply state the address, business name and business telephone number are public. This is to inform the applicant that such information is public.

g. Email (Optional).

- i. An email can be a beneficial tool to communicate to applicants and licensees. BREa emails applicants and licensees newsletters and other important information. Additionally, staff may be able to reach an individual through email when other methods are proving ineffective. However, this is an optional field that the applicant can leave blank.

h. Color Photo.

- i. A color photo helps BREa identify the applicant.<sup>1</sup> BREa does not propose any changes from the previous form regarding this question.

i. Previous California Real Estate Appraiser License.

- i. This question allows BREa to easily determine if an applicant was previously licensed. If previously licensed, BREa can review the applicant's licensing file to determine whether a license should be granted. This may include reviewing the licensing file to determine if any action has been taken against the previous license.

## 5. Part B – Applicant Background Information

a. Other Names.

- i. This question captures if the applicant has used other names in the past. If so, it will be important for BREa to know the other names to ensure the background check is conducted properly.

b. Pending criminal charges or judgments.

- i. BREa's highest priority is consumer protection. BREa may deny a license to an applicant based on certain criminal or unprofessional conduct and requires this information in determining whether to issue the requested license.<sup>2</sup> Furthermore, Business and Professions Code section 11318 requires an applicant with pending criminal issues furnish BREa a certified copy of the police or administrative agency's investigative report and certified copies of the court or administrative agency's docket, complaint or accusation, and judgment or other order.

c. Convictions.

- i. BREa also needs to be aware of criminal convictions for the same reasons as set forth above. However, the question is careful to exclude certain offenses that the applicant is not legally obligated to report.<sup>3</sup> In addition to the convictions that

---

<sup>1</sup> Business and Professions Code sections 11313 and 11314

<sup>2</sup> Cal. Code Regs., tit. 10, section 3721(a).

<sup>3</sup> See Health and Welfare Code sections 11361.5 and 11361.7(b).

applicants are not required to disclose, BREA has decided not to require the disclosure of citations of less than \$500. This amount was selected because BREA has been unnecessarily burdened with reviewing simple traffic citations that result in several hundred dollar fines. However, citations of over \$500 tend to be more serious and the Bureau wants to be aware of those violations in determining whether or not to issue a license. If the applicant has a criminal conviction to report, BREA has developed a spreadsheet in the application to make it easier for the applicant to provide the required information related to the convictions. This information includes the court of the conviction, arresting agency, date of conviction, and other information needed for BREA to evaluate whether to a license should be granted. Business and Professions Code section 11318 requires an applicant with convictions to furnish BREA a certified copy of the police or administrative agency's investigative report and certified copies of the court or administrative agency's docket, complaint or accusation, and judgment or other order.

d. Other licenses and license discipline.

- i. BREA wants to know if an applicant has another professional or vocational license to allow BREA to contact that licensing entity and determine if the applicant has any complaints, investigations, or discipline against their license. If there has been complaints, investigations, or discipline against their license, BREA needs to be aware of the actions to determine if the application should be granted or denied. If the applicant has another license, the applicant may use a spreadsheet in the application for the applicant to easily provide the required information. This information includes the type of license, the state where the license was issued, and if the licensing entity took disciplinary action against the license.

e. Conviction Details

- i. As discussed above, BREA developed a spreadsheet for applicants to use if they have been convicted of a criminal offense. The spreadsheet clearly states what information BREA needs to evaluate the application.

f. License Details

- i. As discussed above, BREA developed a spreadsheet for applicants to use if they have another license. The spreadsheet clearly states what information BREA needs to evaluate the application.

6. Background Check. This section remains unchanged from the previous form. It is included to inform the applicant that they are required to complete a background check and submit fingerprints as part of the application process.

7. Penalty of Perjury Statement. This section was included in the previous form, but has been shortened to remove unnecessary language. This statement is needed to ensure the applicant is being truthful on the application.

8. Instructions. The last page of the application contains detailed instructions, which provide applicants with explanations if they are confused about a question.

a. Part A.

- i. Part A begins with the application level. BREa lists and defines the four different license levels. Applicants can apply for any level of licensure. The remainder of Part A provides basic instructions.

b. Part B.

- i. Part B explains the questions in this section must be answered. This section also explains that a background check and the submission of fingerprints are required.

c. Privacy Notice.

- i. A privacy notice, as required by Civil Code section 1798.17, is included on this form.

### **Form 5012 AMC Renewal Application**

#### **1. Logo, Governor, and Name Change to Bureau.**

The top of the form includes the following information: the name of the current Governor, BREa's logo, and BREa's contact information. This information is being provided to verify that the applicant is using an authentic BREa form and to provide applicants with BREa's contact information. The top banner also includes the State of California seal, which is used on all BREa forms, and a box for BREa's use only in order for staff to process the document.

#### **2. Title.**

The application is entitled "Appraisal Management Company Renewal Application" as this is an Appraisal Management Company (AMC) renewal form. BREa is continuing the use of the title "Appraisal Management Company Renewal Application" to maintain continuity.

#### **3. Opening Instructions.**

Instructions are provided so the applicant has some basic information before they begin completing the form, including: an advisement to fill the form out clearly and in dark ink, how fees must be paid, that fees are non-refundable, a telephone number to call if the applicant has questions, the mailing address where the completed application must be sent, and a website

where all fees are located. This information is included at the beginning of the application because BREa has learned that this is the information most applicants need to know before completing the main parts of the application.

#### 4. Part A – AMC Information.

- a. Name.
  - i. The applicant must provide the name of the AMC. This question has not been changed from the previous form.
- b. AMC Certificate Number.
  - i. This question is requested in order to verify the name of the AMC matches the AMC certificate number.
- c. Mailing Address (Address of Record).
  - i. California Code of Regulations section 3527 is proposed to be amended to simplify the address of record. Currently, an applicant's business address is their address of record, unless otherwise requested. However, if no business address is provided, the mailing address is the address of record. This has resulted in confusion regarding what their address of record is. It is important to clarify and simplify this issue to help ensure that licensees and registrants are aware that the address they provide will be a public record and that the address they provide is where all official communication from BREa will be sent. In an effort to simplify this issue, BREa proposes to amend California Code of Regulations section 3527 to ask for only one address, which will be the address of record.
- d. Business and Residence Telephone Number.
  - i. Licensees are required to provide business and residence telephone numbers.<sup>4</sup>
- e. Fax and Email (Optional).
  - i. A fax number and email address can be beneficial tools to communicate with applicants and licensees. BREa emails applicants and licensees newsletters and other important information. Additionally, staff may be able to reach an individual through fax or email when other methods are proving ineffective. However, this is an optional field that the applicant can leave blank.

#### 5. Part B – Designated Officer.<sup>5</sup>

- a. Name.
  - i. Applications for a certificate of registration as an appraisal management company must include the name of the designated officer.<sup>6</sup> The designated controlling

---

<sup>4</sup> Cal. Code Regs., tit. 10, section 3527.

<sup>5</sup> "Designated Officer" means a Controlling Person authorized by the AMC to act on behalf of the company for purposes of application for, and compliance with, a Certificate of Registration to operate as an AMC. (Cal. Code Regs., tit. 10, section 3500(b)(10).)



person<sup>7</sup>, typically the designated officer, must complete and submit proof of the 7-hour National USPAP course.<sup>8</sup>

b. Title.

6. Part C – Designated Officer Background Information.<sup>9</sup>

a. Other Names.

- i. This question captures if the applicant has used other names in the past. If so, it is important for BREa to know the other names to ensure the background check is conducted.

b. Pending criminal charges or judgments.

- i. BREa's highest priority is consumer protection. BREa may deny the renewal of a certificate of registration of any person or entity based on certain criminal or unprofessional conduct.<sup>10</sup> Therefore, BREa requires this information to determine whether to renew the certificate. In addition, any individual that acts as a controlling person in an AMC and who enters a plea of guilty, no contest, or is convicted of, a felony, or that has a license or certificate as an appraiser refused, denied, canceled or revoked in any other state, is required to report such facts to BREa.<sup>11</sup>

c. Convictions.

- i. BREa also needs to be aware of criminal convictions as set forth above. However, the question is careful to exclude certain offenses that the applicant legally does not need to report.<sup>12</sup> In addition to the convictions that the statute allows applicants not to disclose, BREa has decided to not require disclosure of citations of less than \$500. This amount was selected because BREa has been unnecessarily burdened with reviewing simple traffic citations that result in several hundred dollar fines. However, fines over \$500 tend to be more serious and the Bureau wants to be aware of those violations. If the applicant does have a criminal conviction to report, BREa has developed a spreadsheet to make it

---

<sup>6</sup> Cal. Code Regs., tit. 10, section 3576(f).

<sup>7</sup> "Controlling person" means one or more of the following: (1) An officer or director of an appraisal management company, or an individual who holds a 10 percent or greater ownership interest in an appraisal management company. (2) An individual employed, appointed, or authorized by an appraisal management company that has the authority to enter into a contractual relationship with clients for the performance of appraisal services and that has the authority to enter into agreements with independent appraisers for the completion of appraisals. (3) An individual who possesses the power to direct or cause the direction of the management or policies of an appraisal management company. Business and Professions Code section 11302(f).

<sup>8</sup> Cal. Code Regs., tit. 10, section 3681(d)(2)

<sup>9</sup> A prospective Controlling Person who is not licensed or certified by BREa is required to submit fingerprints to be used by the Department of Justice in order to obtain information relating to the existence or content of state and federal records of arrests or convictions. (Cal. Code Regs., tit. 10, section 3576(e).)

<sup>10</sup> Cal. Code Regs., tit. 10, sections 3576, 3721(a).

<sup>11</sup> Bus. & Prof. Code, section 11345.2(b); Cal. Code Regs., tit. 10, section 3576(c).

<sup>12</sup> See Health and Welfare Code sections 11361.5 and 11361.7(b).

easier for the applicant to provide the required information related to the convictions. This information includes the court of the conviction, arresting agency, date of conviction and other information needed for BREa to evaluate whether to a license should be granted. Again, Business and Professions Code section 11318 requires an applicant with convictions to furnish BREa a certified copy of the police or administrative agency's investigative report and certified copies of the court or administrative agency's docket, complaint or accusation, and judgment or other order.

d. Other licenses and license discipline.

- i. An individual that has had a real estate license or certificate, or the authority to engage in any real estate lending or transfer of real property, refused, denied, canceled, or revoked in California or any other state is not permitted to act as a controlling person of an AMC.<sup>13</sup> In addition, if a controlling person is licensed in another jurisdiction, their license must be in in good standing there and they are required to provide BREa with a certificate of license history from the other jurisdiction.<sup>14</sup> Therefore, in order to determine whether to renew the AMC's certificate, it is necessary for BREa to be aware of any such discipline. BREa created a spreadsheet for the applicant to easily provide the required information. This information includes the type of license, the state licensed, and if any action was taken against the license.

e. Conviction Details.

- i. As discussed above, individuals with criminal convictions may not be eligible to be a controlling person in an AMC. BREa has developed a spreadsheet for applicants to use if they have been convicted of a criminal offense. The spreadsheet clearly states what information BREa needs to evaluate the application.

f. License Details.

- i. As discussed above, BREa developed a spreadsheet for applicants to use if they have another license. The spreadsheet clearly states what information BREa needs to evaluate the application.

7. Penalty of Perjury Statement. This section was included in the previous form, but has been shortened to remove unnecessary language. This statement is needed to ensure the applicant is being truthful on the application.

8. Instructions. The last page of the application contains detailed instructions, which provide applicants with explanations if they are confused about a question.

---

<sup>13</sup> Cal. Code Regs., tit. 10, section 3576(b).

<sup>14</sup> Cal. Code Regs., tit. 10, section 3576(d).

## **Form 3009 Request for Temporary Practice Permit**

### **1. Logo, Governor, and Name Change to Bureau.**

The top of the form includes the following information: the name of the current Governor, BREa's logo, and BREa's contact information. This information is being provided to verify that the applicant is using an authentic BREa form and to provide applicants with BREa's contact information. The top banner also includes the State of California seal, which is used on all BREa forms, and a box for BREa's use only in order for staff to process the document.

### **2. Title.**

The application is entitled "Request for Temporary Practice Permit." BREa is continuing to use the title "Request for Temporary Practice Permit" to maintain continuity.

### **3. Opening Instructions.**

Instructions are provided so the applicant has some basic information before they begin completing the form, including: an advisement to fill the form out clearly and in dark ink, how fees must be paid, that fees are non-refundable, that out-of-state applicants must complete an additional form and the form they are required to use, a telephone number to call if the applicant has questions, the mailing address where the completed application must be sent, and a website where all fees can be located. This information is included at the beginning of the application because BREa has learned that this is the information most applicants need to know before completing the main parts of the application.

### **4. Applicant Information.**

#### **a. Military Questions.**

- i. Business and Professions Code section 114.5 requires BREa to inquire whether the applicant is serving or has served in the military. If so, the application is expedited. In addition, Business and Professions Code section 115.5 requires BREa to expedite the licensure process for an applicant that is married, in a domestic partnership or other legal union with a person who is assigned to active military duty in the State. These questions must be asked to determine if the application should be expedited.

#### **b. Application Level.**

- i. There are three levels of licensure for a temporary permit. This question asks the applicant which level the applicant is applying to receive.

#### **c. Name to Appear on Permit.**

- i. The Bureau needs to know the name of the applicant to ensure they are licensed in another state and eligible to receive a temporary practice permit.
- d. Business Name.
  - i. California Code of Regulations section 3527 requires all applicants and licensees to provide and update their business name.
- e. Mailing Address (Address of Record).
  - i. California Code of Regulations section 3527 is proposed to be amended to simplify the address of record for applicants, licensees, and registrants. Currently, an applicant's business address is their address of record, unless otherwise requested. However, if no business address is provided, the mailing address is the address of record. This has resulted in applicant and licensee confusion regarding their address of record. It is important to clarify this issue to help ensure that applicants are aware that the address they provide will be a public record and is where all official communication from BREA will be sent. In an effort to simplify this issue, BREA proposes to amend California Code of Regulations section 3527 to ask for only one address, which will be the address of record.
- f. State(s) Currently Licensed.
  - i. In order to obtain a temporary practice permit, an applicant must have a valid unrestricted license issued by another state.<sup>15</sup> Thus, the Bureau needs to know the state(s) where the applicant is currently licensed.
- g. Expiration Date(s).
  - i. The applicant's out-of-state license must be current so the Bureau proposes to request that the applicant provide the expiration date(s) of the out-of-state license(s).<sup>16</sup>
- h. Business and Residence Telephone Number.
  - i. California Code of Regulations section 3527 requires applicants to provide business and residence telephone numbers.
- i. Social Security/Taxpayer ID Number.
  - i. The Taxpayer Identification Number is being requested as an alternative to providing a social security number pursuant to Business and Professions Code section 30.
- j. Driver's License Number and Date of Birth.
  - i. This information is requested to assist in verifying the identity of the applicant. The date of birth is requested to verify the applicant's age pursuant to Business and Professions Code section 11340(e), which indicates that a license may not be issued to an individual under the age of 18.
- k. Current or Expired California Real Estate Appraiser's License.

---

<sup>15</sup> Cal. Code Regs., tit. 10, section 3525(a).

<sup>16</sup> Cal. Code. Regs., tit. 10, section 3525(a).

- i. This question is asked to determine if the applicant has a current or expired California real estate appraiser's license and whether it has ever been disciplined. If so, the Bureau may not grant the permit if consumer protection is jeopardized by granting the permit.

5. Penalty of Perjury Statement. This section was included in the previous form, but has been shortened to remove unnecessary language. This statement is needed to ensure the applicant is being truthful on the application.

6. Instructions. The last page of the applications contains detailed instructions, which provides applicants with explanations if they are confused about a question.

7. The Bureau proposes to eliminate from the text of section 3525 "or any federally approved equivalent form" because there is no federally approved equivalent form now and the federal government is not proposing to introduce a federally approved form. Thus, this language is not necessary and may be confusing to an applicant.

### **Form 3011 Change Notification and Miscellaneous Requests**

#### **1. Logo, Governor, and Name Change to Bureau.**

The top of the form includes the following information: the name of the current Governor, BREa's logo, and BREa's contact information. This information is being provided to verify the applicant is using an authentic BREa form and to provide applicants with BREa's contact information. Also in the top banner are the State of California seal and an area for BREa's official use. The seal is used on all BREa forms and the official area is used by BREa staff to process the document. There is also a BREa logo to assist in the authentication of the form.

#### **2. Title.**

The application is entitled "Change Notification and Miscellaneous Requests" because it allows licensees to notify BREa of changes to their contact information and make other miscellaneous requests. The Bureau requires applicants, licensees, and holders of a temporary practice permit or course provider approval permit to complete this form to update their contact information within 10 days of the change.<sup>17</sup> The Bureau also included miscellaneous requests on this form for individuals to easily request letters of license history from the Bureau. BREa is continuing to use the title "Change Notification and Miscellaneous Requests" to maintain continuity.

#### **3. Opening Instructions.**

---

<sup>17</sup> Cal. Code Regs., tit. 10, sections 3527, 3702

Instructions are provided so the applicant has some basic information before they begin to completing the form, including an advisement to fill the form out clearly and in dark ink, how fees must be paid, that fees are non-refundable, that out-of-state licensees must complete an additional form and the form they are required to use, a telephone number to call if the applicant has questions, the mailing address where the form must be sent, and a website where all fees can be located. This information is included at the beginning of the application because BREa has learned that this is the information most applicants need to know before completing the main parts of the application.

#### 4. Part A.

The form is broken into two parts. Part A is for applicants, licensees, and holders of a temporary practice permit or course provider approval permit, who are changing their information or requesting a duplicate license or letter of license history. Part B is for members of the public requesting a letter of license history. It is important to be clear about who is requesting a letter of license history because the Bureau is required to suspend a license or certificate of registration if the licensee or registrant pays his or her fees with a dishonored check.<sup>18</sup> However, suspension is not required if someone other than the licensee or registrant pays fees with a dishonored check.

##### a. Type of Change or Service Request.

This form allows licensees to easily update their information and provides licensees with a way to request certain documents. The licensee simply selects the information that needs to be changed and/or the documents they are requesting.

##### b. License Identification Number, Expiration Date, and Social Security Number/Taxpayer I.D. Number, and Name (as it Appears on Current License).

This information is required to identify the licensee and ensure that a third party is not able to change a licensee's information.

##### c. New Information.

This information is requested in order for BREa to update the licensee's information.

##### d. Penalty of Perjury Statement.

---

<sup>18</sup> Cal. Code Regs., tit. 10, section 3582(c).

This section was included in the previous form, but has been shortened to remove unnecessary language. This statement is needed to ensure the applicant is being truthful on the application.

#### 5. Part B.

This part requests the following information that will allow BREa to complete the request: 1) the requesting party's address where BREa will mail the letter of license history; and 2) the licensee's name and license number so the correct letter of license history may be sent to the requesting party.

6. Instructions. The last page of the applications contains instructions, which provide applicants with explanations if they are confused about a question.

### **Form 3012 License Renewal Application**

#### 1. Logo, Governor, and Name Change to Bureau.

The top of the form includes the following information: the name of the current Governor, BREa's logo, and BREa's contact information. This information is being provided to verify that the applicant is using an authentic BREa form and to provide applicants with BREa's contact information. The top banner also includes the State of California seal, which is used on all BREa forms, and a box for BREa's use in order for staff to process the document.

#### 2. Title.

This form is entitled "License Renewal Application" as this is form needed to renew a license.

#### 3. Opening Instructions.

Instructions are provided so the applicant has some basic information before they begin completing the form, including: an advisement to fill out the form clearly and in dark ink, how fees must be paid, that fees are non-refundable, that out-of-state licensees must complete an additional form and which form they are required to use, a telephone number to call if the applicant has questions, the mailing address where the completed application must be sent, and a website where all fees can be located. This information is included at the beginning of the application because BREa has learned that this is the information most applicants need to know before and completing the main parts of the application.

#### 4. Part A – Applicant Information.

##### a. Military Questions.

- i. Business and Professions Code section 114.5 requires BREa to inquire whether the applicant is serving or has served in the military. If so, the application will be expedited. In addition, Business and Professions Code 115.5 requires BREa to expedite the licensure process for an applicant that is married, in a domestic partnership or other legal union with an active duty member in the military assigned to a duty station in the State. These questions must be asked to determine if the application should be expedited.
- b. Application Level.
  - i. There are four levels of licensure with BREa. This question asks the applicant which level the applicant is applying to receive.
- c. Current License.
  - i. The Bureau asks for the license number and expiration date to ensure that the correct license is being renewed.
- d. Social Security/Taxpayer Identification Number and Date of Birth.
  - i. These questions are asked to verify the identity the applicant and remain unchanged from the previous Renewal Application form except for the Taxpayer Identification Number. The Taxpayer Identification Number is being requested as an alternative to providing a social security number pursuant to Business and Professions Code section 30.
  - ii. The date of birth is requested to verify the applicant's age pursuant to Business and Professions Code section 11340(e), which indicates that a license may not be issued to an individual under the age of 18.
- e. Business Name.
  - i. California Code of Regulations section 3527 requires all applicants and licensees provide and update their business name.
- f. Mailing Address (Address of Record)
  - i. California Code of Regulations section 3527 is proposed to be amended to simplify the address of record for applicants, licensees and registrants. Currently, an applicant's business address is their address of record, unless otherwise requested. However, if no business address is provided, the applicant's mailing address is the address of record. This has resulted in applicant and licensee confusion regarding what their address of record is. It is important to clarify and simplify this issue to help ensure that applicants, licensees and registrants are aware that the address they provide will be a public record and that this is where all official communication from BREa will be sent. In an effort to simplify this issue, BREa proposes to amend California Code of Regulations section 3527 to ask for only one address, which will be the address of record.
- g. Business and Residence Telephone Number.
  - i. California Code of Regulations section 3527 requires applicants and licensees provide BREa with their business and residence telephone numbers.



- h. Email (Optional).
  - i. An email can be a beneficial tool to communicate to applicants and licensees. BREa emails applicants and licensees newsletters and other important information. Additionally, staff may be able to reach an individual through email when other methods are proving ineffective. However, this is an optional field that the applicant can leave blank.

## 5. Part B – Applicant Background Information.

- a. Other Names.
  - i. This question captures if the applicant has used other names in the past. If so, it will be important for BREa to know the other names to ensure the background is conducted.
- b. Pending criminal charges or judgments.
  - i. BREa's highest priority is consumer protection. BREa may deny the renewal of a license or registration based on certain criminal or unprofessional conduct and requires this information in determining whether to issue the requested renewal.<sup>19</sup> Furthermore, Business and Professions Code section 11318 requires a licensee or applicant for licensure with pending criminal issues furnish BREa a certified copy of the police or administrative agency's investigative report and certified copies of the court or administrative agency's docket, complaint or accusation, and judgment or other order.
- c. Convictions.
  - i. BREa also needs to be aware of criminal convictions for the same reasons as set forth above. However, the question is careful to exclude certain offenses that the applicant is not legally obligated to report.<sup>20</sup> In addition to the convictions that applicants are not required to disclose, BREa has decided to not require disclosure of citations of less than \$500. This amount was selected because BREa has been unnecessarily burdened with reviewing simple traffic citations that result in several hundred dollar fines. However, citations over \$500 tend to be more serious and the Bureau wants to be aware of those violations in determining whether or not to issue the license renewal. If the applicant has a criminal conviction to report, BREa has developed a spreadsheet to make it easier for the applicant to provide the required information related to the convictions. This information includes the court of the conviction, arresting agency, date of conviction and other information needed for BREa to evaluate whether to a license should be granted. Business and Professions Code section 11318 requires a licensee or applicant with convictions furnish BREa a certified copy of the

---

<sup>19</sup> Cal. Code Regs., tit. 10, section 3721(a).

<sup>20</sup> See Health and Welfare Code section 11361.5 and 11361.7(b).

police or administrative agency's investigative report and certified copies of the court or administrative agency's docket, complaint or accusation, and judgment or other order.

d. Other licenses and license discipline.

- i. BREA wants to know if an applicant has another professional or vocational license to determine if their other license has been disciplined. If discipline has been imposed on other licenses, BREA needs to be aware of the discipline to determine if the renewal application should be granted or denied. If the applicant has other licenses then BREA created a spreadsheet for the applicant to easily provide the required information. This information includes the type of license, the state licensed, and if any disciplinary action was taken against the license.

e. Conviction Details

- i. As discussed above, BREA developed a spreadsheet for applicants to use if they have been convicted of a crime. The spreadsheet clearly states what information BREA needs to evaluate the application.

f. License Details

- i. As discussed above, BREA developed a spreadsheet for applicants to use if they have another license. The spreadsheet clearly states what information BREA needs to evaluate the application.

6. Penalty of Perjury Statement. This section was included in the previous form, but has been shortened to remove unnecessary language. This statement is needed to ensure the applicant is being truthful on the application.

7. Instructions. The last page of the applications contains detailed instructions in order to provide applicants with explanations if they are confused about a question.

### **Form 3023 License Upgrade Application**

1. Logo, Governor, and Name Change to Bureau.

The top of the form includes the following information: is the name of the current Governor, BREA's logo, and BREA's contact information. This information is being provided to verify that the applicant is using an authentic BREA form and to provide applicants with BREA's contact information. The top banner also includes the State of California seal, which is used on all BREA forms, and a box for BREA's use only in order for BREA staff to process the document.

2. Title.

The application is entitled "License Upgrade Application" as this is the form needed to upgrade a license.

### 3. Opening Instructions.

Instructions are provided so the applicant has some basic information before they begin completing the form, including an advisement to fill the form out clearly and in dark ink, how fees must be paid, that fees are non-refundable, that out-of-state licensees must complete an additional form and which form they are required to use, that examination fees are paid to the test center directly, a telephone number to call if the applicant has questions, the mailing address where the form must be sent, and a website where all fees can be located. This information is included at the beginning of the application because BREa has learned that this is the information most applicants need to know before completing the main parts of the application. The majority of the opening instructions are from the previous form.

### 4. Part A – Applicant Information.

#### a. Military Questions.

- i. Business and Professions Code section 114.5 requires BREa to inquire whether the applicant is serving or has served in the military. If so, the application will be expedited. In addition, Business and Professions Code section 115.5 requires BREa to expedite the licensure process for an applicant that is married, in a domestic partnership or other legal union with a person who is assigned to active military duty in the State. These questions must be asked to determine if the application should be expedited.

#### b. Application Level.

- i. A licensee can upgrade their license to three different levels of licensure. This question asks the applicant which level the applicant is applying to receive.

#### c. Name, Current License Number, Social Security/Taxpayer Identification Number, Date of Birth

- i. These questions are asked to verify the identity the applicant and remain unchanged from the previous Upgrade Application form except for the Taxpayer Identification Number. The Taxpayer Identification Number is being requested as an alternative to providing a social security number pursuant to Business and Professions Code section 30.
- ii. The date of birth is requested to verify the applicant's age pursuant to Business and Professions Code section 11340(e), which indicates that a license may not be issued to an individual under the age of 18.

#### d. Business Name.

- i. California Code of Regulations section 3527 requires all applicants and licensees to provide and update their business name.

#### e. Mailing Address (Address of Record)

- i. California Code of Regulations section 3527 is proposed to be amended to simplify the address of record for applicants, licensees and registrants. Currently, an applicant's business address is their address of record, unless otherwise requested. However, if no business address is provided, the mailing address is the address of record. This has resulted in applicant and licensee confusion as to their address of record. It is important to clarify and simply this issue to help ensure that applicants, licensees and registrants are aware that the address they provide will be a public record and that this address is where all official communication from BREa will be sent. In an effort to simplify this issue, BREa proposes to amend California Code of Regulations section 3527 to ask for only one address, which will be the address of record.
- f. Business and Residence Telephone Number.
  - i. California Code of Regulations section 3527 requires applicants and licensees provide their business and residence telephone numbers.
- g. Email (Optional).
  - i. An email can be a beneficial tool to communicate to applicants and licensees. BREa emails applicants and licensees newsletters and other important information. Additionally, staff may be able to reach an individual through email when other methods are proving ineffective. However, this is an optional field that the applicant can leave blank.

## 5. Part B – Applicant Background Information

- g. Other Names.
  - i. This question captures if the applicant has used other names in the past. If so, it will be important for BREa to know the other names to ensure the background check is conducted.
- h. Pending criminal charges or judgments.
  - i. BREa's highest priority is consumer protection. BREa may deny a license to an applicant based on certain criminal or unprofessional conduct and requires this information to determine whether to issue the requested upgrade application.<sup>21</sup> Furthermore, Business and Professions Code section 11318 requires an applicant with pending criminal issues furnish BREa a certified copy of the police or administrative agency's investigative report and certified copies of the court or administrative agency's docket, complaint or accusation, and judgment or other order.
- i. Convictions.
  - i. BREa also needs to be aware of criminal convictions for the same reasons as set forth above. However, the question is careful to exclude certain offenses that the

---

<sup>21</sup> Cal. Code Regs., tit. 10, section 3721(a).

applicant is not legally obligated to report.<sup>22</sup> In addition to the convictions that applicants are not required to not disclose, BREa has decided to not require disclosure of citations of less than \$500. This amount was selected because BREa has been unnecessarily burdened with reviewing simple traffic citations that result in several hundred dollar fines. However, citations over \$500 tend to be more serious and the Bureau wants to be aware of those violations. If the applicant has a criminal conviction to report, BREa has developed a spreadsheet to make it easier for the applicant to provide the required information related to the convictions. This information includes the court of the conviction, arresting agency, date of conviction and other information needed for BREa to evaluate whether to a license upgrade should be granted. Business and Professions Code section 11318 requires an applicant with convictions to furnish BREa a certified copy of the police or administrative agency's investigative report and certified copies of the court or administrative agency's docket, complaint or accusation, and judgment or other order.

j. Other licenses and license discipline.

- i. BREa wants to know if an applicant has another professional or vocational license to determine if their other license has been disciplined. If discipline has been imposed on other licenses, BREa needs to be aware of the discipline to determine whether their application should be granted or denied. If the applicant has other licenses, BREa created a spreadsheet for the applicant to easily provide the required information. This information includes the type of license, the state licensed, and if any action was taken against the license.

k. Conviction Details

- i. As discussed above, BREa developed a spreadsheet for applicants to use if they have been convicted of a criminal offense. The spreadsheet clearly states what information BREa needs to evaluate the application.

l. License Details

- i. As discussed above, BREa developed a spreadsheet for applicants to use if they have another license. The spreadsheet clearly states what information BREa needs to evaluate the application.

6. Penalty of Perjury Statement. This section was included in the previous form, but has been shortened to remove unnecessary language. This statement is needed to ensure the applicant is being truthful on the application.

7. Instructions. The last page of the applications contains instructions, which provide applicants with explanations if they are confused about a question.

---

<sup>22</sup> See Health and Welfare Code section 11361.5 and 11361.7(b).

## **Form 3025 Application for Reciprocal License**

### **1. Logo, Governor, and Name Change to Bureau.**

The top of the form includes the following information: the name of the current Governor, BREa's logo, and BREa's contact information. This information is being provided to verify that the applicant is using an authentic BREa form and to provide applicants with BREa's contact information. The top banner also includes the State of California seal, which is used on all BREa forms, and a box for BREa's use only for staff to process the document.

### **2. Title.**

The application is entitled "Application for Reciprocal License" as this is an application needed for those who have a license in another state and wish to receive a reciprocal license. BREa is continuing the use of the title "Application for Reciprocal License" to maintain continuity.

### **3. Opening Instructions.**

Instructions are provided so the applicant has some basic information before they begin completing the form, including: an advisement to fill the form out clearly and in dark ink, how fees must be paid, that fees are non-refundable, that out-of-state licensees must complete an additional form and which form they need to use, a telephone number to call if the applicant has questions, the mailing address where the form must be sent, and a website where all fees can be located. This information is included at the beginning of the application because BREa has learned that this is the information most applicants need to know before completing the main parts of the application.

### **4. Part A – Applicant Information.**

#### **a. Military Questions.**

- i. Business and Professions Code section 114.5 requires BREa to inquire whether the applicant is serving or has served in the military. If so, the application is expedited. In addition, Business and Professions code 115.5 requires BREa to expedite the licensure process for an applicant that is married, in a domestic partnership or other legal union with a person who is assigned to active military duty in the State. These questions must be asked to determine if the application should be expedited.

#### **b. Application Level.**

- i. There are three levels of licensure for reciprocity. This question asks the applicant which level the applicant is applying to receive.

#### **c. State of Issuance, License Number, License Expiration Date.**

- i. The Bureau needs this information in order to verify the applicant has a valid license from another state that is eligible for the applicant to obtain a reciprocal license in California.
- d. Name, Gender, Height, Weight, Eye Color, Hair Color, Birthdate, Drivers License Number, Social Security/Taxpayer Identification Number.
  - i. These questions are asked to identify the applicant and remain unchanged from the previous Initial Application form except for the Taxpayer Identification Number. The Taxpayer Identification Number is being provided as an alternative to providing a social security number pursuant to Business and Professions Code section 30
  - ii. The date of birth is requested to verify the applicant's age pursuant to Business and Professions Code section 11340(e), which indicates that a license may not be issued to an individual under the age of 18.
- e. Business Name.
  - i. California Code of Regulations section 3527 requires all applicants and licensees to provide and update their business name.
- f. Mailing Address (Address of Record)
  - i. California Code of Regulations section 3527 is proposed to be amended to simplify the address of record for applicants, licensees and registrants. Currently, an applicant's business address is their address of record, unless otherwise requested. However, if no business address is provided, the mailing address is the address of record. This has resulted in applicant and licensee confusion as to what their address of record is. It is important to clarify and simplify the issue to help ensure that applicants, licensees and registrants are aware that the address they provide will be a public record and that this is where all official communication from BREa will be sent. In an effort to simplify this issue, BREa proposes to amend California Code of Regulations section 3527 to ask for only one address, which will be the address of record.
- g. Business and Residence Telephone Number.
  - i. California Code of Regulations section 3527 requires applicants and licensees provide business and residence telephone numbers.
- h. Email (Optional).
  - i. An email can be a beneficial tool to communicate to applicants and licensees. BREa emails applicants and licensees newsletters and other important information. Additionally, staff may be able to reach an individual through email when other methods are proving ineffective. However, this is an optional field that the applicant can leave blank.
- i. Color Photo.
  - i. A color photo helps BREa identify the applicant. BREa does not propose any changes from the previous form regarding this question.

- j. Previously Submitted an Application.
  - i. This question allows BREa to easily determine if an applicant previously an application. If a previous application was submitted it will reviewed to ensure the applicant is being truthful and complete with their answers.
- k. Current or Former BREa Licensee.
  - i. It is important to know if the applicant was a licensee previously. This will allow BREa to access the previous licensing file and determine whether to issue a reciprocal license.

## 5. Part B – Applicant Background Information

- a. Other Names.
  - i. This question captures if the applicant has used other names in the past. If so, it will be important for BREa to know the other names to ensure the background check is conducted.
- b. Pending criminal charges or judgments.
  - i. BREa's highest priority is consumer protection. BREa may deny a license to an applicant based on certain criminal or unprofessional conduct and requires this information to determine whether to issue a reciprocal license.<sup>23</sup> Furthermore, Business and Professions Code section 11318 requires an applicant with pending criminal issues furnish BREa a certified copy of the police or administrative agency's investigative report and certified copies of the court or administrative agency's docket, complaint or accusation, and judgment or other order.
- c. Convictions.
  - i. BREa also needs to be aware of criminal convictions for the same reasons as set forth above. However, the question is careful to exclude certain offenses that the applicant is not legally obligated to report.<sup>24</sup> In addition to the convictions that applicants are not required to disclose, BREa has decided to not require disclosure of citations of less than \$500. This amount was selected because BREa has been unnecessarily burdened with reviewing simple traffic citations that result in several hundred dollar fines. However, citations over \$500 tend to be more serious and the Bureau wants to be aware of those violations. If the applicant has a criminal conviction to report, BREa has developed a spreadsheet to make it easier for the applicant to provide the required information related to the convictions. This information includes the court of the conviction, arresting agency, date of conviction and other information needed for BREa to evaluate whether to a license should be granted. Business and Professions Code section 11318 requires an applicant with convictions to furnish BREa a certified copy of

---

<sup>23</sup> Cal. Code Regs., tit. 10, section 3721(a).

<sup>24</sup> See Health and Welfare Code section 11361.5 and 11361.7(b).



the police or administrative agency's investigative report and certified copies of the court or administrative agency's docket, complaint or accusation, and judgment or other order.

d. Other licenses and license discipline.

- i. BREA wants to know if the applicant has another professional or vocational license to determine if their other license has been disciplined. If discipline has been imposed on other licenses held by the applicant, BREA needs to be informed of the discipline to determine if their application should be granted or denied. If the applicant has other licenses, BREA created a spreadsheet for the applicant to easily provide the required information. This information includes the type of license, the state licensed, and if any action was taken against the license.

e. Conviction Details

- i. As discussed above, BREA developed a spreadsheet for applicants to use if they have been convicted of a criminal offense. The spreadsheet clearly states what information BREA needs to evaluate the application.

f. License Details

- i. As discussed above, BREA developed a spreadsheet for applicants to use if they have another license. The spreadsheet clearly states what information BREA needs to evaluate the application.

6. Background Check. This section remains unchanged from the previous form. It is included to inform the applicant that they are required to complete a background check and submit fingerprints as part of the application process.

7. Penalty of Perjury Statement. This section was included in the previous form, but has been shortened to remove unnecessary language. This statement is needed to ensure the applicant is being truthful on the application.

8. Instructions. The last page of the applications contains detailed instructions. This is to provide applicants with explanations if they are confused about a question.

**Form 5002 Appraisal Management Company (AMC) Controlling Person Application**

1. Logo, Governor, and Name Change to Bureau.

The top of the form includes the following information: the current Governor, BREA's logo, and BREA's contact information. This information is being provided to verify that the applicant is using an authentic BREA form and to provide applicants with BREA's contact information. The top banner also includes the State of California seal, which is used on all BREA forms, and a box for BREA's use only in order for BREA staff to process the document.

## 2. Title.

The application is entitled “Appraisal Management Company (AMC) Controlling Person Application” as this is the form asks several questions the Bureau needs to know before registering an AMC.

## 3. Opening Instructions.

Instructions are provided so the applicant has some basic information before they begin completing the form, which includes: an advisement to fill the form out clearly and in dark ink, how fees must be paid, that fees are non-refundable, that out-of-state licensees must complete an additional form and which form that is, , that all applications must include an original signature, a telephone number to call if the applicant has questions, the mailing address where the form must be sent, and a website where all fees can be located. This information is included at the beginning of the application because BREa has learned that this is the information most applicants need to know before completing the main parts of the application. The majority of the opening instructions are from the previous form.

## 4. Part I – Controlling Person Contact Information.

- a. Name, Position, Social Security/Taxpayer Identification Number, Date of Birth, Name of AMC.
  - i. These questions are asked to identify the applicant and the corresponding AMC. This and remain unchanged from the previous Initial Application form except for the Taxpayer Identification Number. The Taxpayer Identification Number is being requested as an alternative to providing a social security number pursuant to Business and Professions Code section 30.
- b. Mailing Address (Address of Record)
  - i. California Code of Regulations section 3527 is proposed to be amended to simplify the address of record for applicants, licensees and registrants. Currently, an applicant’s business address is their address of record, unless otherwise requested. However, if no business address is provided, the mailing address is the address of record. This has resulted in applicant and licensee confusion as to their address of record. It is important to clarify and simplify this issue to help ensure that applicants, licensees and registrants are aware that the address they provide will be a public record and that all official communication from BREa will be sent to that. In an effort to simplify this issue, BREa proposes to amend California Code of Regulations section 3527 to ask for only one address, which will be the address of record.
- c. Residence Telephone Number.

- i. California Code of Regulations section 3527 requires applicants and licensees to provide a residence telephone number.
- d. Email (Optional).
  - i. An email can be a beneficial tool to communicate to applicants and licensees. BREa emails applicants and licensees newsletters and other important information. Additionally, staff may be able to reach an individual through email when other methods are proving ineffective. However, this is an optional field that the applicant can leave blank.
- e. Previous Real Estate Appraiser License.
  - i. These questions allow BREa to determine if an applicant is or has ever been licensed as a real estate appraiser in this State or another state. If so, BREa can review the applicant's prior licensing file or request a certificate of license history from another state where the applicant is or has been licensed. If the applicant is currently licensed in another state as a real estate appraiser, the applicant is required to submit a certificate of license history or its equivalent from all other states where the applicant is licensed.

## 5. Part II – Applicant Background Information.

- a. Background Check. All controlling persons not currently licensed with BREa must go through a background check. This language is included to inform the applicant that they are required to complete a background check and submit fingerprints as part of the application process.
- b. Other Names.
  - i. This question captures if the applicant has used other names in the past. If so, it will be important for BREa to know the other names to ensure the background check is conducted.
- c. Convictions.
  - i. BREa also needs to be aware of criminal convictions to determine if any controlling person has certain criminal or unprofessional conduct.<sup>25</sup> However, the question is careful to exclude certain offenses that the applicant is not legally obligated to report.<sup>26</sup> In addition to the convictions that applicants are not required to disclose, BREa has decided to not require disclosure of citations of less than \$500. This amount was selected because BREa has been unnecessarily burdened with reviewing simple traffic citations that result in several hundred dollar fines. However, citations over \$500 tend to be more serious and the Bureau wants to be aware of those violations. If the applicant has a criminal conviction to report, BREa has developed a spreadsheet to make it easier for the applicant to provide

---

<sup>25</sup> Cal. Code Regs., tit. 10, sections 3576, 3721(a).

<sup>26</sup> See Health and Welfare Code section 11361.5 and 11361.7(b).

the required information related to the convictions. This information includes the court of the conviction, arresting agency, date of conviction and other information needed for BREa to evaluate whether to a license should be granted.

d. Financial, Real Estate, or Fiduciary Limits.

- i. This question remains unchanged from the previous application. It is included to learn if the applicant has been involved in any actions that resulted in limitations on their ability to deal with financial or real estate-related activity, or engage in fiduciary relationships. This is important to know because controlling persons have the ability to shape how the AMC does business. Individuals with a history or financial, real estate, or fiduciary issues must undergo further evaluation before they are approved as a controlling person.<sup>27</sup>

e. Pending criminal charges or judgments.

- i. BREa may deny the application if any controlling person has certain criminal or unprofessional conduct.<sup>28</sup> Therefore, BREa requires this information to determine whether to grant the application. In addition, any individual that acts as a controlling person in an AMC and who enters a plea of guilty, no contest, or is convicted of, a felony, or that has a license or certificate as an appraiser refused, denied, canceled or revoked in any other state, is required to report such facts to BREa.<sup>29</sup>

f. Other licenses and license discipline.

- i. BREa wants to know if an applicant has another professional or vocational license to determine if their other license has been disciplined. If discipline has been imposed on other licenses, BREa needs to be aware of the discipline to determine if their application should be granted. If the applicant has other licenses, BREa created a spreadsheet for the applicant to easily provide the required information. This information includes the type of license, the state licensed, and if any action was taken against the license.

g. Other Controlling Person Duties

- i. This question seeks to obtain whether the individual is a controlling person of another AMC. If so, the Bureau can cross reference the AMCs to ensure the other AMCs have not been disciplined. If discipline has been imposed, the Bureau needs to evaluate what role and responsibility, if any, the applicant had in the AMC.

h. Conviction Details

- i. As discussed above, BREa developed a spreadsheet for applicants to use if they have been convicted of a criminal offense. The spreadsheet clearly states what information BREa needs to evaluate the application.

---

<sup>27</sup> Cal. Code Regs., tit. 10, section 3576(b)

<sup>28</sup> Cal. Code Regs., tit. 10, sections 3576, 3721(a).

<sup>29</sup> Bus. & Prof. Code, section 11345.2(b); Cal. Code Regs, tit. 10, section 3576(c).

i. License Details

- i. As discussed above, BREa developed a spreadsheet for applicants to use if they have another license. The spreadsheet clearly states what information BREa needs to evaluate the application.

6. Part III. Applicant Declaration.

This section was included in the previous form. The declaration is to provide, under penalty of perjury, the truth of the information provided in the application. The declaration also allows for service of process on the AMC's agent of service of process is also service on the applicant.

7. Instructions.

The last page of the application contains detailed instructions. This is to provide applicants with explanations if they are confused about a question.

**Form 5011 AMC Change Notification and Miscellaneous Requests**

1. Logo, Governor, and Name Change to Bureau.

The top of the form includes the following information: the name of the current Governor, BREa's logo, and BREa's contact information. This information is being provided to verify that the applicant is using an authentic BREa form and to provide BREa's contact information. The top banner also includes the State of California seal, which is used on all BREa forms, and a box for BREa's use only for staff to process the document.

2. Title.

The application is entitled "Appraisal Management Company (AMC) Change Notification and Miscellaneous Requests" as this is the form needed for AMCs to change their contact information and that of their controlling persons. BREa is continuing to use the title "Appraisal Management Company (AMC) Change Notification and Miscellaneous Request" to maintain continuity.

3. Opening Instructions.

The opening instructions begin with a notice that all changes must be approved and signed by the designated officer. This notice is to prevent a controlling person from attempting to change AMC information without the signature of the designated officer. The form has several bullet points of instruction. This is to provide the applicant with some basic information before they begin to read the form. This information includes advisement to fill the form out clearly and in dark ink,

how fees must be paid, that fees are non-refundable, out-of-state licensees must complete an additional form, a number to call if the applicant has questions, the mailing address where the form must be sent, and a website where all fees are located. This information is included at the beginning of the application because BREa has learned that this is the information most applicants need to know before reviewing the main parts of the application.

#### 4. Part A – AMC Information.

- a. Name of AMC, Certificate Number, Mailing Address, Business Telephone, Fax, and Email Address.
  - i. This information is requested to validate the AMC that is currently on file.

#### 5. Part B – Information to be Changed or Requested

- a. Type of Change or Request.
  - i. There are several different types of changes an AMC can complete with this form. The AMC needs to select the type of changes or request it is making with this form.
- b. Changes to AMC Information
  - i. The first possible type of change is to change the AMC information such as the mailing address. The applicant only needs to select the appropriate field that needs to be changed and then make that change.
- c. Change for Agent of Service of Process
  - i. This information only needs to be changed if it is an out-of-state AMC that changes their agent for service of process. If so, the applicant can fill in the information for their new or amended agent in this section.
- d. Controlling Person Change
  - i. Here the applicant can add or remove controlling persons, change a controlling person's information or change a designated person's information. There is a note included in this section to remind the AMC that any new controlling person must undergo a background check. If there is a new designated officer then that individual signs a new declaration stating who the agent of service of process is for the AMC.

#### 6. Part C – Change and Request Declaration

- e. All changes must be approved by the designated officer on file with the Bureau. Therefore, this section must be completed by the designated officer to ensure the designated officer is aware and approves the change being requested with the form.

7. Instructions. The last page of the applications contains detailed instructions. This is to provide applicants with explanations if they are confused about a question.

## **Form 5013 AMC Controlling Person Renewal Application**

### **1. Logo, Governor, and Name Change to Bureau.**

The top of the form includes the following information: the name of the current Governor, BREa's logo, and BREa's contact information. This information is being provided to verify that the individual is using an authentic BREa form and to provide BREa's contact information. The top banner also includes the State of California seal, which is used on all BREa forms, and a box for BREa's use only for staff to process the application.

### **2. Title.**

The application is entitled "Appraisal Management Company Controlling Person Renewal Application" as this is the application all controlling persons need to complete in order for the AMC to renew its registration.. This is a new form to allow the Bureau to be informed of any convictions, license discipline or other actions that may have occurred since the last renewal period that may disqualify the controlling person from serving as a controlling person.

### **3. Opening Instructions.**

Instructions are provided so the applicant has some basics information before they begin completing the form. This information includes: an advisement to fill the form out clearly and in dark ink, a telephone number to call if the applicant has questions, the mailing address where the form must be sent, and advisements to answer truthfully, including potential consequences for failure to do so.

### **4. Questions**

#### **a. Other Names.**

- i. This question captures if the applicant has used other names in the past. If so, it will be important for BREa to know the other names to ensure the background is conducted.

#### **b. Pending criminal charges or judgments.**

- i. BREa's highest priority is consumer protection. BREa needs to be aware of pending charges or judgments to determine if the applicant's license application should be granted or denied.

#### **c. Convictions.**

- i. BREa also needs to be aware of criminal convictions for the same reasons as set forth above. However, the question is careful to exclude certain offenses that the

applicant is legally not obligated to report.<sup>30</sup> In addition to the convictions that applicants are not required to disclose, BREa has decided to not require disclosure of citations of less than \$500. This amount was selected because BREa has been unnecessarily burdened with reviewing simple traffic citations that result in several hundred dollar fines. However, fines over \$500 tend to be more serious and the Bureau wants to be aware of those violations. If the applicant has a criminal conviction to report, BREa has developed a spreadsheet to make it easier for the applicant to provide the required information related to the convictions. This information includes the court of the conviction, arresting agency, date of conviction and other information needed for BREa to evaluate whether to a license should be granted.

d. Other licenses and license discipline.

- i. BREa wants to know if an applicant has another professional or vocational license to determine if their other license has been disciplined. If discipline has been imposed on other licenses, BREa needs to be informed of the discipline to determine if their initial application should be granted or denied. If the applicant has other licenses then BREa created a spreadsheet for the applicant to easily provide the required information. This information includes the type of license, the state licensed, and if any action was taken against the license.

e. Conviction Details

- i. As discussed above, BREa developed a spreadsheet for applicants to use if they have been convicted of a criminal offense. The spreadsheet clearly states what information BREa needs to evaluate the application.

f. License Details

- i. As discussed above, BREa developed a spreadsheet for applicants to use if they have another license. The spreadsheet clearly states what information BREa needs to evaluate the application.

### **Underlying Data**

The Bureau did not rely on any underlying data.

### **Fiscal Impact Analysis in General**

This proposal has no fiscal impact.

### **Economic Impact Analysis/Assessment**

The Bureau has made the initial determination that the proposed regulatory action would have no statewide adverse economic impact directly affecting California.

---

<sup>30</sup> See Health and Welfare Code sections 11361.5 and 11361.7(b).



- **Analysis of creation/elimination of jobs:** There will be no creation or elimination of jobs. This is because the changes to the forms are primarily formatting updates, clarifying changes, and changes to authority and references. There are no new burdens placed upon licensees that would eliminate jobs. There may be a minor increase in licensees from the Bureau's acceptance of taxpayer identification numbers in lieu of social security numbers.
- **Analysis of creation/elimination of businesses:** There will be no creation or elimination of businesses. This is because the changes to the forms are primarily formatting updates, clarifying changes, and changes to authority and references. There are no new burden or benefits placed upon businesses that would create or eliminate businesses.
- **Analysis of expansion of business:** The proposed regulations are not expected to, directly or indirectly, lead to the expansion of new businesses within California.
- **Benefits of the Regulation to the Health and Welfare of California Residents, Worker Safety, and the State's Environment:** The proposed regulations do not affect worker safety or the state's environment because the proposal has nothing to do with worker safety or the environment.

#### Significant Adverse Economic Impact on Business

The proposed action will not have a significant adverse economic impact on business. This is because the changes to the forms are primarily formatting updates, clarifying changes, and changes to authority and references. There are no new burden or benefits placed upon businesses that would create or eliminate businesses.

#### Specific Technologies or Equipment

This regulation does not mandate the use of specific technologies or equipment.

#### Consideration of Alternatives

No reasonable alternative which was considered or that has otherwise been identified and brought to the attention of BREa would be either more effective in carrying out the purpose for which the action is proposed or would be as effective and less burdensome to the affected parties than the proposed regulation.

Proposed Text  
California Code of Regulations  
Title 10, Chapter 6.5

The text below represents existing language modified to show proposed changes. Proposed deletions are in ~~striketrough~~. Proposed additions are in underline.

**§ 3527. Personal Information or Contact Change.**

(a) All applicants for and holders of a license, temporary practice permit or course provider approval permit shall submit written notice to BREa of any change to the following within 10 days on the Change Notification and Miscellaneous Requests Form REa 3011 (Rev. ~~5/8/00~~ 1/1/16), which is herein incorporated by reference:

- (1) Name;
- (2) Residence telephone number;
- (3) Business telephone number;
- ~~(4) Residence address;~~
- ~~(5) (4) Business name or address; or~~
- ~~(6) (5) Mailing address.~~

(b) All holders of a Certificate of Registration, or a Controlling Person for an Appraisal Management Company shall submit written notice to BREa of any change to the following within 10 days on the Appraisal Management Company Change Notification and Miscellaneous Requests Form REa 5011 (~~New 09/01/10~~ Rev. 1/1/16), which is herein incorporated by reference:

- (1) Name Change (addition or deletion of a Controlling Person);
- (2) Residence telephone number;
- (3) Business telephone number;
- ~~(4) Residence address;~~
- ~~(5) (4) Business name or address; or~~
- ~~(6) (5) Mailing address.~~

Any Form REa 5011 (~~New 09/01/10~~ Rev. 1/1/16) submitted to BREa must be signed by the Designated Officer of the Appraisal Management Company.

(c) The mailing address ~~business name, address and telephone number~~ shall be considered the applicant's, licensee's or Registrant's address ~~and telephone number~~ of record for all purposes ~~unless otherwise requested in writing by the applicant, licensee or Registrant and.~~ The address of record, business name and business telephone number shall be considered a matter of public record. If no business address is provided, the mailing address shall be the address of record. A physical address is required as the address of record (a P.O. Box, Rural Route, Star Route, or mail box rental service location is not allowed)

Note: Authority cited: Sections 11313, 11314 and 11340, Business and Professions Code.  
Reference: Sections 11340 and 11345.05, Business and Professions Code.

**§ 3525. Temporary Practice Permit.**

- (a) In lieu of obtaining a license, appraisers with currently valid unrestricted licenses issued by another state may be issued a Temporary Practice Permit to perform a single appraisal assignment.
- (b) A Temporary Practice Permit is not required if an appraiser from another state associates with an appraiser licensed in California and the work is limited to assisting in the preparation of an appraisal under the conditions specified in Business and Professions Code Section 11324.
- (c) The applicant shall have satisfied the requirements for a license in a state or territory where the licensing provisions comply with Title XI of FIRREA and where the Appraisal Subcommittee has not issued a finding that the policies, practices, or procedures of the state or territory are inconsistent with Title XI.
- (d) The license held shall be current and in good standing with the issuing state or territory.
- (e) A Temporary Practice Permit is required when any appraiser enters California to appraise or provide technical review services in a federally related transaction and the appraiser is not licensed in California.
- (f) Application for a Temporary Practice Permit shall be made on Request for Temporary Practice Permit Form REA 3009 (Rev. ~~3/16/10~~ 1/1/16) which is herein incorporated by reference, ~~or any federally approved equivalent form~~ to the Bureau at its principal office in Sacramento, together with the fees specified in Section 3582 and such information as may be requested by the Chief.
- (g) An appraisal assignment under such temporary practice shall be completed within one year after issuance of the Temporary Practice Permit, or within the period of time that the applicant holds a valid, current license in his or her issuing state, whichever is sooner. Should the applicant's license from the issuing state expire less than one year from the issuance date of the Temporary Practice Permit, the Bureau shall extend the term of the Temporary Practice Permit for up to one year from the initial date of issuance upon proof of renewal of the license from the applicant's issuing state. The term of the Temporary Practice Permit shall not be extended beyond one year from the initial date of issuance.

Note: Authority cited: Sections 11313, 11314, 11324, 11340, 11350 and 11352, Business and Professions Code. Reference: Sections 11350 and 11351, Business and Professions Code.

**§ 3561. Application for Licensing.**

- (a) Applications for licensing shall be valid for one year from date of receipt by the Bureau, during which time the applicant must qualify for admission to the examination. The one year period shall not be extended. If the applicant wishes to be considered for licensure after expiration of the one year period, he or she must reapply, including submission of all necessary documents and payment of all applicable fees in accordance with then existing requirements.
- (b) Applicants for licensing shall have an appropriate knowledge of the English language, including reading, writing and spelling, and of arithmetical computations common to real estate and appraisal practices.
- (c) Applicants for licensing must submit an Initial Application and applicable related forms REA 3001 (Rev. ~~6/1/09~~ 1/1/16), 3002 (Rev. 3/16/10), 3003 (Rev. 3/16/10) and 3004, (Rev. 4/7/08) which are incorporated herein by reference.

Note: Authority cited: Sections 114.5, 115.5, 11313 and 11340, Business and Professions Code. Reference: Sections ~~10153~~, 30, 11340, 11343, 11344, 11401 and 11408, Business and Professions Code, and 11361.5 and 11361.7, Health and Safety Code.

**§ 3569. Reciprocity.**

(a) An applicant for a reciprocal license shall hold a valid credential from a state that is in compliance with Title XI of the Financial Institutions Reform, Recovery, and Enforcement Act of 1989 as determined by the Appraisal Subcommittee. The credentialing requirements of the applicant's credentialing state (as the requirements exist at the time of application for reciprocal license) must meet or exceed those of BREa (as the requirements exist at the time of application for reciprocal credential).

(b) Applicants for a reciprocal license shall complete and submit the following:

(1) Application for Reciprocal License Form REA 3025 (Rev. ~~5/8/00~~ 1/1/16) and form REA 3006 (Rev. 5/8/00); and

(2) Evidence that the applicant holds a valid credential from another state;

(c) A reciprocal licensee shall comply with all statutes and rules governing licensed appraisers in California.

Note: Authority cited: Sections 114.5, 115.5, 11313, 11314, 11340 and 11350, Business and Professions Code. Reference: Sections 30, 11341 and 11350, Business and Professions Code, and 11361.5 and 11361.7, Health and Safety Code.

**§ 3570. Time Limits for Processing Applications.**

(a) Within 90 days of receipt of the Initial Application, Forms REA 3001 (Rev. ~~6/1/09~~ 1/1/16), 3002 (Rev. 3/16/10), 3003 (Rev. 3/16/10) and 3004, (Rev. 4/7/08), Upgrade Application, Form REA 3023 (Rev. ~~5/8/00~~ 1/1/16), Renewal Application, Form REA 3012 (Rev. ~~5/8/00~~ 1/1/16), Request for Temporary Permit, Form REA 3009 (Rev. ~~3/16/10~~ 1/1/16), Course Provider Accreditation Form REA 3013 (Rev. 5/8/00), or Course Accreditation and Description Form REA 3014 (Rev. 5/8/00), the Bureau shall give written notice to the applicant that:

(1) the application is complete; or

(2) the application is deficient, describing what information is deficient and/or inadequate.

(A) An application is deficient if the applicant has not completed and provided the Bureau with all of the items required by Article 4 of these regulations, or any other information requested by the Bureau to complete the application.

(b) Within 90 days of receipt of a completed Request for Issuance, Form REA 3008 (Rev. 5/8/00), Application for Renewal, Form REA 3012, (Rev. ~~5/8/00~~ 1/1/16) or Request for Temporary Practice Permit, Form REA 3009, (Rev. ~~3/16/10~~ 1/1/16), Course Provider Accreditation Form REA 3013 (Rev. 5/8/00), or Course Accreditation and Description Form REA 3014 (Rev. 5/8/00), the Bureau shall issue or deny the requested license or accreditation provided that:

(1) The applicant has provided all required information;

(2) All required fees have been received by the Bureau; and

(3) Results of applicable criminal records checks have been received from the Department of Justice and/or Federal Bureau of Investigation, and any background check has been completed.

(c) The Bureau's completed review of an application for the two years immediately preceding this regulation has been approximately:

(1) a minimum of 90 days.

- (2) a median of 120 days.
  - (3) a maximum of 150 days.
  - (d) A notice of deficiency pursuant to (a)(2) above shall include written notice of the following:
    - (1) That the applicant shall have the right to request a hearing by the Chief on the grounds that:
      - (A) The Bureau did not send the applicant a deficiency notice or a completed application notice within the time provided in (a) above; or
      - (B) The Bureau did not issue the license or submit to the applicant a deficiency notice within the time provided in (b) above.
    - (2) A request for hearing under this section shall be made to the Chief, in writing, clearly specifying the violations alleged, within 30 days from the date the notice of deficiency is mailed from the Bureau.
    - (3) If the Chief determines that the Bureau exceeded the time limits without good cause, ~~as defined in Section 15376 of the Government Code or exempted in Section 15377 of the Government Code~~, the applicant shall be reimbursed in full of any and all filing fees paid by the applicant and actually received by the Bureau.
  - (e) The time necessary to complete an informal conference in accordance with Section 3729 of these regulations, and/or a hearing pursuant to Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, shall be excluded in determining whether or not the Bureau has complied with the 90 day requirement of subsections (a) and (b) above.
  - (f) Every adjudicatory hearing to determine whether an application should be granted shall be conducted in accordance with Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code.
  - (g) In no event shall a failure to comply with the requirements of this Section constitute grounds in and of itself for the issuance of a license or approval of accreditation.
- Note: Authority cited: Sections 114.5, 115.5, 11313 and 11314, Business and Professions Code.  
Reference: Sections 30, Business and Professions Code and 11361.5 and 11361.7, Health and Safety Code. ~~15376 and 15378, Government Code.~~

**§ 3575. Appraisal Management Company Certificate of Registration Application.**

- (a) Applications for a Certificate of Registration shall be valid for one year from the date of receipt by the Bureau. The one-year period shall not be extended.
- (b) Applicants for a Certificate of Registration shall have an appropriate knowledge of the English language, including reading, writing and spelling, and of arithmetic computations common to real estate and appraisal practice.
- (c) Applicants for a Certificate of Registration must submit an Appraisal Management Company Certificate of Registration Application form, REA 5001 (Rev. 09/01/10), which is hereby incorporated by reference.
- (d) Applicants for a Certificate of Registration must also submit a separate application for each Controlling Person for the company. Each Controlling Person must complete an Appraisal Management Company Controlling Person Application form, REA 5002 (Rev. ~~09/01/10~~ 1/1/16) which is hereby incorporated by reference.

(e) All applicants for a Certificate of Registration must submit the names of all Controlling Persons, including the name of the Designated Officer, as these terms are defined herein.

Note: Authority cited: Section 11314, Business and Professions Code. Reference: Sections 30, 11320.5, 11343 and 11345, Business and Professions Code, and 11361.5 and 11361.7, Health and Safety Code.

**§ 3602. Change in the Status of License.**

(a) If a licensed appraiser wishes to change the status of his/her license to a higher classification, the appraiser must submit the following information to the Bureau:

- (1) Completed Upgrade Application form REA 3023 (Rev. ~~5/8/00~~ 1/1/16) and forms REA 3001 (Rev. ~~6/1/09~~ 1/1/16), REA 3002 (Rev. 3/16/10), REA 3003 (Rev. 3/16/10) and REA 3004, (rev. 4/7/08), as applicable (excluding the fingerprint card) pursuant to Section 3561;
- (2) All applicable fees; and
- (3) Education and/or experience documentation as necessary to qualify at the certified residential or certified general level.

Note: Authority cited: Sections 114.5, 115.5, 11313, 11314 and 11340, Business and Professions Code. Reference: Sections 30 and 11340, Business and Professions Code, and 11361.5 and 11361.7, Health and Safety Code.

**§ 3603. Converting a Trainee License to a Full License or Higher Classification.**

Trainee licensed appraisers wishing to convert to a residential license or higher classification must submit the following to the Bureau:

- (a) Upgrade Application form REA 3023 (Rev. ~~5/8/00~~ 1/1/16) and forms REA 3001 (Rev. ~~6/1/09~~ 1/1/16), REA 3002 (Rev. 3/16/10), REA 3003 (Rev. 3/16/10) and REA 3004, (Rev. 4/7/08).
- (b) All applicable fees as required;
- (c) If the Trainee License was obtained based on education, documentation shall be submitted to verify completion of the required hours of experience in accordance with Section 3563.
- (d) Notwithstanding subsections (1) and (3), the applicant shall submit such documentation as the Bureau deems necessary to determine whether or not the holder of the trainee license meets the minimum requirements for the license level to which he or she wishes to convert.

Note: Authority cited: Sections 114.5, 115.5, 11313, 11314 and 11340, Business and Professions Code. Reference: Sections 30 and 11340, Business and Professions Code, and 11361.5 and 11361.7, Health and Safety Code.

**§ 3681. Renewal Application.**

(a) A license may be renewed by submitting the following to the Bureau:

- (1) Appropriate fees including state and federal registry fees pursuant to Section 3582;
- (2) Every other renewal period, proof of completion of approved continuing education by one of the following:

(A) Official transcript;

- (B) Report card; or
- (C) Completion certificates.

(3) Every renewal period, proof of completion of the 7-hour National USPAP Update Course;

(4) Form REA 3012 (Rev. ~~5/8/00~~ 1/1/16) Renewal Application which is herein incorporated by reference.

(b) The renewed license shall be valid for a maximum of two years from the date of expiration of the prior license, provided the Renewal Application is received by the Bureau before midnight of the last day of the period for which the previous license was issued, accompanied by the applicable renewal fees and evidence of good faith compliance with the provisions of this Article.

(c) Complete applications for renewal of licenses should be submitted to the Bureau at least 90 days prior to the license expiration date. However, applications for renewal shall not be accepted by the Bureau more than 180 days prior to the expiration of the existing license.

(d) A Certificate of Registration may be renewed by submitting the following to the Bureau:

- (1) Appropriate fees including state and federal registry fees pursuant to section 3582;
- (2) Every renewal period, a designated Controlling Person with the authority to enter into contractual relationships with independent appraisers or who is involved in the appraiser selection approval process must submit proof of completion of the 7-hour National USPAP Update Course, approved by the Appraiser Qualifications Board of the Appraisal Foundation; and

(3) Appraisal Management Company Renewal Application Form REA 5012 (~~New 09/01/10~~ Rev. 1/1/16) which is herein incorporated by reference.

(4) Appraisal Management Company Controlling Person Application Form 5013 (Rev. 1/1/16), which is herein incorporated by reference, for each controlling person.

(e) The renewed Certificate of Registration shall be valid for a maximum of two years from the date of expiration of the prior registration, provided the Renewal Application is received by the Bureau before 5 p.m. Pacific Standard Time of the last day of the period for which the previous Certificate of Registration was issued, accompanied by the applicable renewal fees.

(f) Complete applications for renewal of Certificate of Registration should be submitted to the Bureau at least 90 days prior to the Certificate of Registration expiration date. However, application for renewal shall not be accepted by the Bureau more than 180 days prior to the expiration of the existing Certificate of Registration.

Note: Authority cited: Sections 114.5, 115.5, 11313, 11314, 11340, 11341, 11360 and 11361, Business and Professions Code. Reference: Sections 30, 11340, 11341, 11343, 11345.1, 11345.2, 11345.3, 11360 and 11361, Business and Professions Code, and 11361.5 and 11361.7, Health and Safety Code.



BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY  
GOVERNOR EDMUND G. BROWN JR.

**BUREAU OF REAL ESTATE APPRAISERS**  
1102 Q Street, Suite 4100, Sacramento, CA 95811  
P 916.552.9000 F 916.552.9007 | [www.brea.ca.gov](http://www.brea.ca.gov)



BREA USE ONLY

## ***LICENSE UPGRADE APPLICATION***

- ▶ Type or print clearly in blue or black ink and provide an original signature.
- ▶ All fees paid must be paid by pre-printed personal check, company check, cashier's check, certified check, money order, or credit card (see form REA 2030 to pay by credit card).
- ▶ By statute, all fees submitted are deemed earned upon receipt.
- ▶ All out-of-state addresses require a completed and notarized Consent to Service of Process (REA 3006).
- ▶ Please refer to <http://www.brea.ca.gov/html/LicensingFees.html> for current license application fees.
- ▶ Examination fees are paid directly to the examination test center at the time of the examination.
- ▶ If you have any questions, please write to the address listed or call (916) 552-9000.
- ▶ Mail completed application, fee and qualifying documentation to:  
**BUREAU OF REAL ESTATE APPRAISERS**  
1102 Q Street, Suite 4100  
Sacramento, CA 95811

### **PART A - APPLICANT INFORMATION**

- ☐ Check this box if you are currently serving or have ever served in the United States military (Please submit proof of current or former military service).
- ☐ Check this box if you are married to, or are in a domestic partnership or other legal union with an active member of the United States military assigned to active duty in California (Please submit proof of marriage, domestic partnership, or other legal union with an active member of the military).

<b>1. Level Upgrading To</b>		
<input type="checkbox"/> Residential License	<input type="checkbox"/> Certified Residential	<input type="checkbox"/> Certified General
<b>2. Name As It Appears On Current License</b>		
Last	First	Middle
<b>3. Current License Number</b>		
License Number	Expiration Date	
<b>4. Social Security / Taxpayer ID Number</b>		<b>5. Date of Birth</b>
<b>6. Business Name</b>		
<b>7. Mailing Address (Address of Record)</b>		<input type="checkbox"/> Check if Change
Address		
City	County	State      Zip Code
<b>8. Business Telephone Number</b>		<b>9. Residence Telephone Number</b>
<b>10. Email Address (optional)</b>		



## PART B - APPLICANT BACKGROUND INFORMATION

1. Have you ever used or been known by any name other than, or in addition to, the name listed on Part A of this application?  
☐ No      ☐ Yes, explain \_\_\_\_\_
2. Are there criminal charges pending against you at this time, or are you currently awaiting judgment and sentencing following entry of a plea or jury verdict? If yes, please specify the court in which the matter is pending, the case number and charges, and submit a copy of the police report and a certified copy of the complaint and docket.  
☐ No      ☐ Yes, explain \_\_\_\_\_
3. Within the last eight years, have you been convicted of, or pled guilty or *nolo contendere* to any criminal or civil offense in the United States, its territories, or a foreign country? This includes every citation, infraction, misdemeanor and/or felony, including traffic violations. You are not required to report convictions that were adjudicated in the juvenile court, convictions under California Health and Safety Code sections 11357(b), (c), (d), (e) or section 11360(b) which are two years old, or traffic infractions resulting in a fine of \$500 or less. Convictions that were later dismissed pursuant to sections, 1203.4, 1203.4a, or 1203.41 of the California Penal Code or equivalent non-California law must be disclosed. If yes, complete "Conviction Details" section below. In addition to completing the "Conviction details" section below, you must submit a certified copy of the police report and certified copies of the complaint and judgement or the order.  
☐ No      ☐ Yes, complete "Conviction Details" below.
4. Do you currently hold a professional or vocational license issued by any governmental agency other than BREA? If yes, please identify the license held, the license number and the issuing agency.  
☐ No      ☐ Yes, explain \_\_\_\_\_
5. Have you ever had a professional or vocational license, certificate or registration denied, suspended, restricted, revoked, surrendered or disciplined in any way in this state or any other state? If yes, complete "License Details" section below. In addition to completing the "License Details" section below, you must submit a certified copy of the police report or administrative agency's investigative report and certified copies of the court or administrative agency's docket, complaint, or accusation and judgment or other order.  
☐ No      ☐ Yes, complete "License Details" below.

### CONVICTION DETAILS

Complete one line for each violation and provide explanation below. If you are unable to provide this information, provide all the requested information you can obtain, with an explanation for the missing information. If the conviction status has been subsequently changed or reduced, note that fact in the area provided for additional information. Attachments for additional information should specify which lines you are referring to. **EACH ADDITIONAL SHEET MUST BE SIGNED BY THE APPLICANT.**

\* CODE SECTION VIOLATED (i.e., 1014, 484, ETC)

\*\*\* DISPOSITION (i.e., PROBATION, PAROLE, FINE, PENDING, ETC.)

\*\* CODE VIOLATED (i.e., VEHICLE CODE, PENAL CODE, ETC.)

\*\*\*\* DISMISSED (pursuant to sections, 1203.4, 1203.4a, or 1203.41 of the California Penal Code)

Court of Conviction (Name and Address)	Arresting Agency (Name and Address)	Date of Conviction	Type of Conviction	* Code Section Violated	** Code Violated	*** Disposition	Case Number	**** Dismissed
<i>Example: Sacramento Cnty, 456 Main St., Sac</i>	<i>Sacramento City Police 123 Main St., Sac</i>	<i>02/20/12</i>	<input type="checkbox"/> Felony <input type="checkbox"/> Other <input checked="" type="checkbox"/> Misdemeanor	<i>23152</i>	<i>Vehicle Code</i>	<i>6 months probation and \$200 fine</i>	<i>1234</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
1.			<input type="checkbox"/> Felony <input type="checkbox"/> Other <input type="checkbox"/> Misdemeanor					<input type="checkbox"/> Yes <input type="checkbox"/> No
2.			<input type="checkbox"/> Felony <input type="checkbox"/> Other <input type="checkbox"/> Misdemeanor					<input type="checkbox"/> Yes <input type="checkbox"/> No
3.			<input type="checkbox"/> Felony <input type="checkbox"/> Other <input type="checkbox"/> Misdemeanor					<input type="checkbox"/> Yes <input type="checkbox"/> No

ADDITIONAL INFORMATION: SPECIFY WHICH LINES YOU ARE REFERRING TO. ATTACH EXTRA SHEETS IF MORE ROOM IS NEEDED. EACH ADDITIONAL SHEET MUST BE SIGNED.

### LICENSE DETAILS

Type of License	License ID No.	License Expiration Date	State
Action (revoked, etc.)	Date of Action	Date Action Terminated	Code Section Violated

ADDITIONAL INFORMATION: ATTACH EXTRA SHEETS IF MORE ROOM IS NEEDED. EACH ADDITIONAL SHEET MUST BE SIGNED AND DATED.

I certify under penalty of perjury that the foregoing information, and information provided on all attachments, is true and correct and that I have answered each question fully and truthfully and without any purpose of evasion. I understand that providing false information is grounds for denial or revocation of any license and may subject me to disciplinary action and/or criminal prosecution.

Signature \_\_\_\_\_

Date \_\_\_\_\_

## INSTRUCTIONS

### PART A

1. **LEVEL OF UPGRADE APPLICATION** - Mark the box for the level for which you wish to apply for upgrade. Mark one box only. Include the appropriate fee. Please refer to <http://www.brea.ca.gov/html/LicensingFees.html> for current license application fees.
2. **CURRENT LICENSE NUMBER** - Your License Number.
3. **NAME** - Your name as it appears on your license.
4. **SOCIAL SECURITY / TAXPAYER I.D. NUMBER**- Enter your social security or individual taxpayer identification number. **BREA cannot issue a license without a Social Security or Individual Taxpayer Identification Number.**
5. **BIRTHDATE** - Your date of birth. (mm/dd/yyyy)
6. **BUSINESS NAME AND ADDRESS OF RECORD** -  
The name of your business or employer name.  
**The information required is a matter of public record.**
7. **MAILING ADDRESS** - Your address of record.  
**The information required is a matter of public record.**
8. **BUSINESS TELEPHONE NUMBER** - Your business telephone number.  
**The information required is a matter of public record.**
9. **RESIDENCE TELEPHONE NUMBER** - Your hometelephone number.
10. **EMAIL ADDRESS** - Your email address. (optional)

### PART B

**1 - 5. BACKGROUND QUESTIONS** - Answer all of these questions and attach any required additional information to this application.

**SIGNATURE OF APPLICANT** - Original signature and date required.

### Privacy Information

Section 1798.17 of the Civil Code requires this notice be provided when collecting personal or confidential information from individuals. *Each individual has the right to review personal information maintained by this Agency, unless access is exempted by law.*

**Bureau of Real Estate Appraisers**  
**Custodian of Records**  
**1102 Q Street, Suite 4100**  
**Sacramento, CA 95811**  
**Telephone: (916) 552-9000**

General powers of the Chief, Sections 11310 and 11313 of the Business and Professions Code authorizes the maintenance of this information. Business and Professions Code Section 30, Chapter 1361, Section 1, requires each real estate appraiser licensee to initially provide to the Bureau of Real Estate Appraisers his or her social security number or individual taxpayer identification number which will be furnished to the Franchise Tax Board. Your social security number or individual taxpayer identification number shall not be deemed a public record and shall not be open to the public for inspection. The Franchise Tax Board will use your number to establish identification exclusively for tax purposes. The Real Estate Appraisers Law or Regulations of the Chief require applicants to provide the Bureau of Real Estate Appraisers with specific information. If all or any part of the required information is not provided, processing may be delayed. In addition, the Chief may suspend or revoke a license, or in the case of a license applicant, may deny the issuance for misstatements of facts (including a failure to disclose a material fact) in an application for a license. The information requested in this form is primarily used to furnish license status information to the Bureau of Real Estate Appraisers, and to answer inquiries and give information to the public on license status, mailing addresses and actions taken to deny, revoke, restrict or suspend licenses for cause. This information may be transferred to real estate appraisal licensing agencies in other states, law enforcement agencies (City Police, Sheriff's Departments, District Attorneys, Attorney General, F.B.I.), and any other regulatory agencies (i.e., Department of Business Oversight, Department of Insurance, Bureau of Real Estate, Department of Consumer Affairs, California Bar Association, Appraisal Subcommittee, California Community Colleges Chancellor's Office).

### FEES

For a list of current fees, go to  
<http://www.orea.ca.gov/html/LicensingFees.html>



BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY  
GOVERNOR EDMUND G. BROWN JR.

**BUREAU OF REAL ESTATE APPRAISERS**  
1102 Q Street, Suite 4100, Sacramento, CA 95811  
P 916.552.9000 F 916.552.9007 | [www.brea.ca.gov](http://www.brea.ca.gov)



BREA USE ONLY

### ***LICENSE RENEWAL APPLICATION***

- ▶ Type or print clearly in blue or black ink and provide an original signature.
- ▶ All fees paid must be paid by pre-printed personal check, company check, cashier's check, certified check, money order, or credit card (see form REA 2030 to pay by credit card).
- ▶ By statute, all fees submitted are deemed earned upon receipt.
- ▶ All out-of-state addresses require a completed and notarized Consent to Service of Process (REA 3006).

- ▶ Please refer to <http://www.brea.ca.gov/html/LicensingFees.html> for current license application fees.
- ▶ If you have any questions, please write to the address listed or call (916) 552-9000.
- ▶ Mail completed application, fee and qualifying documentation to:  
**BUREAU OF REAL ESTATE APPRAISERS**  
1102 Q Street, Suite 4100  
Sacramento, CA 95811

#### **PART A - APPLICANT INFORMATION**

- ☐ Check this box if you are currently serving or have ever served in the United States military (Please submit proof of current or former military service).
- ☐ Check this box if you are married to, or are in a domestic partnership or other legal union with an active member of the United States military assigned to active duty in California (Please submit proof of marriage, domestic partnership, or other legal union with an active member of the military).

<b>1. Application Level</b>			
<input type="checkbox"/> Trainee License	\$335	<input type="checkbox"/> Residential License	\$415
<input type="checkbox"/> Certified Residential	\$465	<input type="checkbox"/> Certified General	\$465
Late Fee = an additional \$125			
<b>2. Current License</b>			
License Number		Expiration Date	
<b>3. Name as it Appears on Current License</b>			
Last		First	Middle
<b>4. Social Security / Taxpayer ID Number</b>		<b>5. Birth Date</b>	
<b>6. Business Name</b>			<input type="checkbox"/> Check if Change
<b>7. Mailing Address (Address of Record)</b>			<input type="checkbox"/> Check if Change
Address			
City		County	State Zip Code
<b>8. Business Telephone Number</b>		<b>9. Residence Telephone Number</b>	
<b>10. Email Address (optional)</b>			<input type="checkbox"/> Check if Change

## PART B - APPLICANT BACKGROUND INFORMATION

1. Have you used or been known by any name other than, or in addition to, the name listed on Part A of this application?  
☐ No      ☐ Yes, explain \_\_\_\_\_
2. Are there criminal charges pending against you at this time, or are you currently awaiting judgment and sentencing following entry of a plea or jury verdict? If yes, please specify the court in which the matter is pending, the case number and charges, and submit a copy of the police report and a certified copy of the complaint and docket.  
☐ No      ☐ Yes, explain \_\_\_\_\_
3. Within the last eight years, have you been convicted of, or pled guilty or *nolo contendere* to any criminal or civil offense in the United States, its territories, or a foreign country? This includes every citation, infraction, misdemeanor and/or felony, including traffic violations. You are not required to report convictions that were adjudicated in the juvenile court, convictions under California Health and Safety Code sections 11357(b), (c), (d), (e) or section 11360(b) which are two years old, or traffic infractions resulting in a fine of \$500 or less. Convictions that were later dismissed pursuant to sections, 1203.4, 1203.4a, or 1203.41 of the California Penal Code or equivalent non-California law must be disclosed. If yes, complete "Conviction Details" section below. In addition to completing the "Conviction details" section below, you must submit a certified copy of the police report and certified copies of the complaint and judgement or the order.  
☐ No      ☐ Yes, complete "Conviction Details" below.
4. Do you currently hold a professional or vocational license issued by any governmental agency other than BREA? If yes, please identify the license held, the license number and the issuing agency.  
☐ No      ☐ Yes, explain \_\_\_\_\_
5. Within the last eight years, have you had a professional or vocational license, certificate or registration denied, suspended, restricted, revoked, surrendered or disciplined in any way in this state or any other state other than BREA? If yes, complete "License Details" section below. In addition to completing the "License Details" section below, you must submit a certified copy of the police report or administrative agency's investigative report and certified copies of the court or administrative agency's docket, complaint, or accusation and judgment or other order.  
☐ No      ☐ Yes, complete "License Details" below.

### CONVICTION DETAILS

Complete one line for each violation and provide explanation below. If you are unable to provide this information, provide all the requested information you can obtain, with an explanation for the missing information. If the conviction status has been subsequently changed or reduced, note that fact in the area provided for additional information. Attachments for additional information should specify which lines you are referring to. **EACH ADDITIONAL SHEET MUST BE SIGNED BY THE APPLICANT.**

\* CODE SECTION VIOLATED (i.e., 1014, 484, ETC)

\*\*\* DISPOSITION (i.e., PROBATION, PAROLE, FINE, PENDING, ETC.)

\*\* CODE VIOLATED (i.e., VEHICLE CODE, PENAL CODE, ETC.)

\*\*\*\* DISMISSED (pursuant to sections, 1203.4, 1203.4a, or 1203.41 of the California Penal Code)

Court of Conviction (Name and Address)	Arresting Agency (Name and Address)	Date of Conviction	Type of Conviction	* Code Section Violated	** Code Violated	*** Disposition	Case Number	**** Dismissed
<b>Example:</b> Sacramento Cnty. 456 Main St., Sac	Sacramento City Police 123 Main St., Sac	02/20/12	<input type="checkbox"/> Felony <input type="checkbox"/> Other <input checked="" type="checkbox"/> Misdemeanor	23152	Vehicle Code	6 months probation and \$200 fine	1234	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
1.			<input type="checkbox"/> Felony <input type="checkbox"/> Other <input type="checkbox"/> Misdemeanor					<input type="checkbox"/> Yes <input type="checkbox"/> No
2.			<input type="checkbox"/> Felony <input type="checkbox"/> Other <input type="checkbox"/> Misdemeanor					<input type="checkbox"/> Yes <input type="checkbox"/> No
3.			<input type="checkbox"/> Felony <input type="checkbox"/> Other <input type="checkbox"/> Misdemeanor					<input type="checkbox"/> Yes <input type="checkbox"/> No

ADDITIONAL INFORMATION: SPECIFY WHICH LINES YOU ARE REFERRING TO. ATTACH EXTRA SHEETS IF MORE ROOM IS NEEDED. EACH ADDITIONAL SHEET MUST BE SIGNED.

### LICENSE DETAILS

Type of License	License ID No.	License Expiration Date	State
Action (revoked, etc.)	Date of Action	Date Action Terminated	Code Section Violated

ADDITIONAL INFORMATION: ATTACH EXTRA SHEETS IF MORE ROOM IS NEEDED. EACH ADDITIONAL SHEET MUST BE SIGNED AND DATED.

I certify under penalty of perjury that the foregoing information, and information provided on all attachments is true and correct and that I have answered each question fully and truthfully and without any purpose of evasion. I understand that providing false information is grounds for denial or revocation of any license and may subject me to disciplinary action and/or criminal prosecution.

Signature \_\_\_\_\_

Date \_\_\_\_\_

## INSTRUCTIONS

### PART A

1. **APPLICATION LEVEL** - Mark the box for the license type you are renewing.
2. **CURRENT LICENSE NUMBER** - Your License Number and expiration date.
3. **NAME** - Your name as it appears on your license.
4. **SOCIAL SECURITY NUMBER/TAXPAYER IDENTIFICATION NUMBER** - Enter your social security or individual taxpayer identification number. **BREA cannot issue a license without a Social Security or Individual Taxpayer Identification Number.**
5. **BIRTHDATE** - Your date of birth. (mm/dd/yyyy)
6. **BUSINESS NAME** - The name of your business or employer name.  
**The information required is a matter of public record.**
7. **MAILING ADDRESS** - Your address of record.  
**The information required is a matter of public record.**
8. **BUSINESS TELEPHONE NUMBER** - Your business telephone number. **The information required is a matter of public record.**
9. **RESIDENCE TELEPHONE NUMBER** - Your home telephone number.
10. **EMAIL ADDRESS** - Your email address.

### PART B

**1 - 5. BACKGROUND QUESTIONS** - Answer all of these questions and attach any required additional information to this application.

**SIGNATURE OF APPLICANT** - Original signature and date required.

### Privacy Information

Section 1798.17 of the Civil Code requires this notice be provided when collecting personal or confidential information from individuals. *Each individual has the right to review personal information maintained by this Agency, unless access is exempted by law.*

#### Bureau of Real Estate Appraisers

##### Custodian of Records

1102 Q Street, Suite 4100

Sacramento, CA 95811

Telephone: (916) 552-9000

General powers of the Chief, Sections 11310 and 11313 of the Business and Professions Code authorizes the maintenance of this information. Business and Professions Code Section 30, Chapter 1361, Section 1, requires each real estate appraiser licensee to initially provide to the Bureau of Real Estate Appraisers his or her social security or taxpayer identification number which will be furnished to the Franchise Tax Board. Your social security or taxpayer identification number shall not be deemed a public record and shall not be open to the public for inspection. The Franchise Tax Board will use your number to establish identification exclusively for tax purposes. The Real Estate Appraisers Law or Regulations of the Chief require applicants to provide the Bureau of Real Estate Appraisers with specific information. If all or any part of the required information is not provided, processing may be delayed. In addition, the Chief may suspend or revoke a license, or in the case of a license applicant, may deny the issuance for misstatements of facts (including a failure to disclose a material fact) in an application for a license. The information requested in this form is primarily used to furnish license status information to the Bureau of Real Estate Appraisers, and to answer inquiries and give information to the public on license status, mailing addresses and actions taken to deny, revoke, restrict or suspend licenses for cause. This information may be transferred to real estate appraisal licensing agencies in other states, law enforcement agencies (City Police, Sheriff's Departments, District Attorneys, Attorney General, F.B.I.), and any other regulatory agencies (including, but not limited to, Department of Business Oversight, Department of Insurance, Bureau of Real Estate, Department of Consumer Affairs, California Bar Association, Appraisal Subcommittee, California Community Colleges Chancellor's Office).



BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY  
GOVERNOR EDMUND G. BROWN JR.

**BUREAU OF REAL ESTATE APPRAISERS**  
1102 Q Street, Suite 4100, Sacramento, CA 95811  
P 916.552.9000 F 916.552.9007 | [www.brea.ca.gov](http://www.brea.ca.gov)



BREA USE ONLY

## INITIAL LICENSE APPLICATION

- ▶ Type or print clearly in blue or black ink and provide an original signature.
- ▶ All fees paid must be paid by pre-printed personal check, company check, cashier's check, certified check, money order, or credit card (see form REA 2030 to pay by credit card).
- ▶ By statute, all fees submitted are deemed earned upon receipt.
- ▶ All out-of-state addresses require a completed and notarized Consent to Service of Process (REA 3006).
- ▶ Examination fees are paid directly to the examination test center at the time of the examination.
- ▶ Please refer to <http://www.brea.ca.gov/html/LicensingFees.html> for current license application fees.
- ▶ If you have any questions, please write to the address listed or call (916) 552-9000.
- ▶ Mail completed application, fee and qualifying documentation to:  
**BUREAU OF REAL ESTATE APPRAISERS**  
1102 Q Street, Suite 4100  
Sacramento, CA 95811

### PART A - APPLICANT INFORMATION

- ☐ Check this box if you are currently serving or have ever served in the United States military (Please submit proof of current or former military service).
- ☐ Check this box if you are married to, or are in a domestic partnership or other legal union with an active member of the United States military assigned to active duty in California (Please submit proof of marriage, domestic partnership, or other legal union with an active member of the military).

#### 1. Application Level (mark only one box)

- ☐ Trainee License      ☐ Residential License      ☐ Certified Residential      ☐ Certified General

#### 2. Name

Last First Middle

#### 3. Gender

- ☐ Male    ☐ Female

#### 4. Height

#### 5. Weight

#### 6. Eye Color

#### 7. Hair Color

#### 8. Birthdate

#### 9. Driver's License Number

State

#### 10. Social Security / Taxpayer ID Number

#### 11. Additional Social Security / Taxpayer ID Numbers

#### 12. Business Name

#### 13. Mailing Address (Address of Record)

Address

City

County

State

Zip Code

#### 14. Business Telephone Number

#### 15. Residence Telephone Number

#### 16. Email Address (optional)

#### 17. Color Photo

Have you previously held a California Real Estate Appraiser license?

- ☐ No    ☐ Yes, License Number \_\_\_\_\_

#### IMPORTANT

1. **SIGN** (on the back) of the 2" x 2" color photo of passport quality.
2. Staple one **HERE**.

## PART B - APPLICANT BACKGROUND INFORMATION

1. Have you ever used or been known by any name other than, or in addition to, the name listed on Part A of this application?  
☐ No      ☐ Yes, explain \_\_\_\_\_
2. Are there criminal charges pending against you at this time, or are you currently awaiting judgment and sentencing following entry of a plea or jury verdict? If yes, please specify the court in which the matter is pending, the case number and charges, and submit a copy of the police report and a certified copy of the complaint and docket.  
☐ No      ☐ Yes, explain \_\_\_\_\_
3. Have you ever been convicted of, or pled guilty or *nolo contendere* to any criminal or civil offense in the United States, its territories, or a foreign country? This includes every citation, infraction, misdemeanor and/or felony, including traffic violations. You are not required to report convictions that were adjudicated in the juvenile court, convictions under California Health and Safety Code sections 11357(b), (c), (d), (e) or section 11360(b) which are two years old, or traffic infractions resulting in a fine of \$500 or less. Convictions that were later dismissed pursuant to sections, 1203.4, 1203.4a, or 1203.41 of the California Penal Code or equivalent non-California law must be disclosed. If yes, complete "Conviction Details" section below. In addition to completing the "Conviction Details" section below, you must submit a certified copy of the police report and certified copies of the complaint and judgment or the order.  
☐ No      ☐ Yes, complete "Conviction Details" below.
4. Do you currently hold a professional or vocational license issued by any governmental agency other than BRE? If yes, please identify the license held, the license number and the issuing agency.  
☐ No      ☐ Yes, explain \_\_\_\_\_
5. Have you ever had a professional or vocational license, certificate or registration denied, suspended, restricted, revoked, surrendered or disciplined in any way in this state or any other state? If yes, complete "License Details" section below. In addition to completing the "License Details" section below, you must submit a certified copy of the police report or administrative agency's investigative report and certified copies of the court or administrative agency's docket, complaint, or accusation and judgment or other order.  
☐ No      ☐ Yes, complete "License Details" below.

### CONVICTION DETAILS

Complete one line for each violation and provide explanation below. If you are unable to provide this information, provide all the requested information you can obtain, with an explanation for the missing information. If the conviction status has been subsequently changed or reduced, note that fact in the area provided for additional information. Attachments for additional information should specify which lines you are referring to. **EACH ADDITIONAL SHEET MUST BE SIGNED BY THE APPLICANT.**

\* CODE SECTION VIOLATED (i.e., 1014, 484, ETC)

\*\*\* DISPOSITION (i.e., PROBATION, PAROLE, FINE, PENDING, ETC.)

\*\* CODE VIOLATED (i.e., VEHICLE CODE, PENAL CODE, ETC.)

\*\*\*\* DISMISSED (pursuant to sections, 1203.4, 1203.4a, or 1203.41 of the California Penal Code)

Court of Conviction (Name and Address)	Arresting Agency (Name and Address)	Date of Conviction	Type of Conviction	* Code Section Violated	** Code Violated	*** Disposition	Case Number	**** Dismissed
<i>Example:</i> Sacramento Cnty. 456 Main St., Sac	Sacramento City Police 123 Main St., Sac	02/20/12	<input type="checkbox"/> Felony <input type="checkbox"/> Other <input checked="" type="checkbox"/> Misdemeanor	23152	Vehicle Code	6 months probation and \$200 fine	1234	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
1.			<input type="checkbox"/> Felony <input type="checkbox"/> Other <input type="checkbox"/> Misdemeanor					<input type="checkbox"/> Yes <input type="checkbox"/> No
2.			<input type="checkbox"/> Felony <input type="checkbox"/> Other <input type="checkbox"/> Misdemeanor					<input type="checkbox"/> Yes <input type="checkbox"/> No
3.			<input type="checkbox"/> Felony <input type="checkbox"/> Other <input type="checkbox"/> Misdemeanor					<input type="checkbox"/> Yes <input type="checkbox"/> No

ADDITIONAL INFORMATION: SPECIFY WHICH LINES YOU ARE REFERRING TO. ATTACH EXTRA SHEETS IF MORE ROOM IS NEEDED. EACH ADDITIONAL SHEET MUST BE SIGNED.

### LICENSE DETAILS

Type of License	License ID No.	License Expiration Date	State
Action (revoked, etc.)	Date of Action	Date Action Terminated	Code Section Violated

ADDITIONAL INFORMATION: ATTACH EXTRA SHEETS IF MORE ROOM IS NEEDED. EACH ADDITIONAL SHEET MUST BE SIGNED AND DATED.

### BACKGROUND CHECK

The State of California requires that all applicants submit for a background check. California resident applicants must have their fingerprints taken at any participating LiveScan location using form *BCII 8016*. For a list of LiveScan fingerprinting locations, please visit:

<https://oag.ca.gov/fingerprints/locations>

Non-California applicants must have their fingerprints taken on two *FD-258 (Rev. 9-9-13)* cards and both submitted with this application.

I certify under penalty of perjury that the foregoing information, and information provided on all attachments, is true and correct and that I have answered each question fully and truthfully and without any purpose of evasion. I understand that providing false information is grounds for denial or revocation of any license and may subject me to disciplinary action and/or criminal prosecution.

Signature \_\_\_\_\_

Date \_\_\_\_\_

## INSTRUCTIONS

### PART A

1. **APPLICATION LEVEL** - Mark the box for the level for which you wish to apply. Mark one box only. Include the appropriate fee. Please refer to <http://www.brea.ca.gov/html/LicensingFees.html> for current license application fees.

**Trainee License** - Requires a Basic Education Attachment (REA 3002) and documentation supporting 150 hours of education not over 5 years old and completion of Supervisor/Trainee Appraisers course.

**Residential License** - Requires a Basic Education Attachment (REA 3002), documentation supporting 150 hours of education and 30 semester credits or an Associate's or higher degree. In addition, an Experience Log (REA 3004) supporting 2000 hours and 12 months appraisal experience are required.

**Certified Residential** - Requires a Basic Education Attachment (REA 3002), documentation supporting 200 hours of education, and proof of a Bachelor's degree or higher. In addition, an Experience Log (REA 3004) supporting 2500 hours and 2 years and 6 months appraisal experience are required.

**Certified General** - Requires a Basic Education Attachment (REA 3002) and documentation supporting 300 hours of education and proof of a Bachelor's degree or higher. In addition, an Experience Log (REA 3004) supporting 3000 hours and 2 years and 6 months appraisal experience (of which 1500 must be non-residential experience) are required.

NOTE: Education for all levels must include a 15 hour Uniform Standards of Professional Appraisal Practice (USPAP) course.

2. **NAME** - Your name.
3. **GENDER** - Mark the appropriate box.
4. **HEIGHT** - Your height in feet and inches. Example: 5' 8"
5. **WEIGHT** - Your weight in pounds. Example: 150 lbs.
5. **EYE COLOR** - Do not abbreviate.
7. **HAIR COLOR** - Do not abbreviate.
8. **BIRTHDATE** - Your date of birth. (mm/dd/yyyy)
9. **DRIVER'S LICENSE NUMBER** - Your driver's license number, including the issuing state.
10. **SOCIAL SECURITY / TAXPAYER IDENTIFICATION NUMBER** - Enter your social security or individual taxpayer identification number. **BREA cannot issue a license without a Social Security or Individual Taxpayer Identification Number.**
11. **ADDITIONAL SOCIAL SECURITY or TAXPAYER IDENTIFICATION NUMBERS** - All additional social security numbers or individual taxpayer identification numbers issued for any reason.
12. **BUSINESS NAME** - The name of your business or employer name. **The information required is a matter of public record.**
13. **MAILING ADDRESS** - Your address of record. **The information required is a matter of public record.**
14. **BUSINESS TELEPHONE NUMBER** - Your business telephone number. **The information required is a matter of public record.**
15. **RESIDENCE TELEPHONE NUMBER** - Your home telephone number.
16. **EMAIL ADDRESS** - Your email address. (optional)
17. **COLOR PHOTO** - One color 2" x 2" photo of passport quality, of your head and shoulders only, is required. The photo must have been taken within the last 60 days. Sign and date (in ink) on the back of the photo. Staple on the space provided.

### PART B

- 1 - 5. **BACKGROUND QUESTIONS** - Answer all of these questions and attach any required additional information to this application.

**BACKGROUND CHECK** - California resident applicants must have fingerprints taken at any participating LiveScan location using form **BCII 8016**. Non-California residents must have fingerprints taken on two **FD-258 (Rev. 9-9-13)** cards and submitted with this application.

**SIGNATURE OF APPLICANT** - Original signature and date required.

#### Privacy Information

Section 1798.17 of the Civil Code requires this notice be provided when collecting personal or confidential information from individuals. Each individual has the right to review personal information maintained by this Agency, unless access is exempted by law.

Bureau of Real Estate Appraisers  
Custodian of Records  
1102 Q Street, Suite 4100  
Sacramento, CA 95811  
Telephone: (916) 552-9000

General powers of the Chief, Sections 11310 and 11313 of the Business and Professions Code authorizes the maintenance of this information. Business and Professions Code Section 30, Chapter 1361, Section 1, requires each real estate appraiser licensee to initially provide to the Bureau of Real Estate Appraisers his or her social security number or individual taxpayer identification number which will be furnished to the Franchise Tax Board. Your social security number or individual taxpayer identification number shall not be deemed a public record and shall not be open to the public for inspection. The Franchise Tax Board will use your number to establish identification exclusively for tax purposes. The Real Estate Appraisers Law or Regulations of the Chief require applicants to provide the Bureau of Real Estate Appraisers with specific information. If all or any part of the required information is not provided, processing may be delayed. In addition, the Chief may suspend or revoke a license, or in the case of a license applicant, may deny the issuance for misstatements of facts (including a failure to disclose a material fact) in an application for a license. The information requested in this form is primarily used to furnish license status information to the Bureau of Real Estate Appraisers, and to answer inquiries and give information to the public on license status, mailing addresses and actions taken to deny, revoke, restrict or suspend licenses for cause. This information may be transferred to real estate appraisal licensing agencies in other states, law enforcement agencies (City Police, Sheriff's Departments, District Attorneys, Attorney General, F.B.I.), and any other regulatory agencies (included, but not limited to, Department of Business Oversight, Department of Insurance, Bureau of Real Estate, Department of Consumer Affairs, California Bar Association, Appraisal Subcommittee, California Community Colleges Chancellor's Office).





BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY  
GOVERNOR EDMUND G. BROWN JR.

**BUREAU OF REAL ESTATE APPRAISERS**  
1102 Q Street, Suite 4100, Sacramento, CA 95811  
P 916.552.9000 F 916.552.9007 | www.brea.ca.gov



BREA USE ONLY

## REQUEST FOR TEMPORARY PRACTICE PERMIT

- ▶ Type or print clearly in blue or black ink and provide an original signature.
- ▶ All fees paid must be paid by pre-printed personal check, company check, cashier's check, certified check, money order, or credit card (see form REA 2030 to pay by credit card).
- ▶ By statute, all fees submitted are deemed earned upon receipt.
- ▶ All out-of-state addresses require a completed and notarized Consent to Service of Process (REA 3006).

- ▶ Please refer to <http://www.brea.ca.gov/html/LicensingFees.html> for current license application fees.
- ▶ If you have any questions, please write to the address listed or call (916) 552-9000.
- ▶ Mail completed application, fee and qualifying documentation to:

**BUREAU OF REAL ESTATE APPRAISERS**  
1102 Q Street, Suite 4100  
Sacramento, CA 95811

### APPLICANT INFORMATION

- ☐ Check this box if you are currently serving or have ever served in the United States military (Please submit proof of current or former military service).
- ☐ Check this box if you are married to, or are in a domestic partnership or other legal union with an active member of the United States military assigned to active duty in California (Please submit proof of marriage, domestic partnership, or other legal union with an active member of the military).

#### 1. Application Level ( Mark one box only )

<input type="checkbox"/> Residential License Non-complex one-to-four residential units having a transaction value less than \$1,000,000 and complex one-to-four residential units having a transaction value less than \$250,000.	<input type="checkbox"/> Certified Residential 1 - 4 residential units, without regard to value or complexity.	<input type="checkbox"/> Certified General All types of real property.
--	---	---

#### 2. Name To Appear On Permit

Last	First	Middle
------	-------	--------

#### 3. Business Name

--

#### 4. Mailing Address (Address of Record)

Address			
City	County	State	Zip Code

5. State(s) Currently Licensed	6. Expiration Date(s)	7. Business Telephone Number	8. Residence Telephone Number

9. Social Security / Taxpayer ID Number	10. Driver's License Number	11. Date of Birth

#### 12. Current or Expired California Real Estate Appraiser's License

<input type="checkbox"/> None <input type="checkbox"/> Yes	License Number

I certify under penalty of perjury that the foregoing information, and information provided on all attachments, is true and correct and that I have answered each question fully and truthfully and without any purpose of evasion. I understand that providing false information is grounds for denial or revocation of any permit and may subject me to disciplinary action and/or criminal prosecution. If I receive a permit, I will adhere to the Real Estate Appraisers' Licensing and Certification Law.

Signature

Date

## INSTRUCTIONS

1. **APPLICATION LEVEL** - Mark the box for the permit you wish issued. Your license from the issuing state or territory must equal or exceed the level for which you are applying.
2. **NAME** - Your name.
3. **BUSINESS NAME** - The name of your business or employer name.  
**Information required is a matter of public record.**
4. **MAILING ADDRESS** - Your address of record.  
**Information required is a matter of public record.**
5. **STATE(S) CURRENTLY LICENSED** - The state or states in which you currently hold a real estate appraisal license.
6. **EXPIRATION DATE(S)** - The expiration date(s) of your current license(s).
7. **BUSINESS TELEPHONE NUMBER** - Your business telephone number. **Information required is a matter of public record.**
8. **RESIDENCE TELEPHONE NUMBER** - Your home telephone number.
9. **SOCIAL SECURITY / TAXPAYER IDENTIFICATION NUMBER** - Enter your social security or individual taxpayer identification number. **BREA cannot issue a permit without a Social Security or Individual Taxpayer Identification Number.**
10. **DRIVER'S LICENSE NUMBER** - Your driver's license number and the state of issuance.
11. **DATE OF BIRTH** - Your date of birth. (mm/dd/yyyy)
12. **PREVIOUS CALIFORNIA APPRAISER LICENSE** - Indicate if you have ever held a California appraiser license. If the answer is "yes", list the license number.

**SIGNATURE OF APPLICANT** - Original signature and date required.

### Privacy Information

Section 1798.17 of the Civil Code requires this notice be provided when collecting personal or confidential information from individuals. *Each individual has the right to review personal information maintained by this Agency, unless access is exempted by law:*

**Bureau of Real Estate Appraisers**  
**Custodian of Records**  
**1102 Q Street, Suite 4100**  
**Sacramento, CA 95811**  
**Telephone: (916) 552-9000**

General powers of the Chief, Sections 11310 and 11313 of the Business and Professions Code authorizes the maintenance of this information. Business and Professions Code Section 30, Chapter 1361, Section 1, requires each real estate appraiser licensee to initially provide to the Bureau of Real Estate Appraisers his or her social security number or individual taxpayer identification number which will be furnished to the Franchise Tax Board. Your social security number or individual taxpayer identification number shall not be deemed a public record and shall not be open to the public for inspection. The Franchise Tax Board will use your number to establish identification exclusively for tax purposes. The Real Estate Appraisers Law or Regulations of the Chief require applicants to provide the Bureau of Real Estate Appraisers with specific information. If all or any part of the required information is not provided, processing may be delayed. In addition, the Chief may suspend or revoke a license, or in the case of a license applicant, may deny the issuance for misstatements of facts (including a failure to disclose a material fact) in an application for a license. The information requested in this form is primarily used to furnish license status information to the Bureau of Real Estate Appraisers, and to answer inquiries and give information to the public on license status, mailing addresses and actions taken to deny, revoke, restrict or suspend licenses for cause. This information may be transferred to real estate appraisal licensing agencies in other states, law enforcement agencies (City Police, Sheriff's Departments, District Attorneys, Attorney General, F.B.I.), and any other regulatory agencies (including, but not limited to, Department of Business Oversight, Department of Insurance, Bureau of Real Estate, Department of Consumer Affairs, California Bar Association, Appraisal Subcommittee, California Community Colleges Chancellor's Office).

Please remember to include a *Consent to Service Process Form* (REA 3006) along with this application.



BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY  
GOVERNOR EDMUND G. BROWN JR.

**BUREAU OF REAL ESTATE APPRAISERS**  
1102 Q Street, Suite 4100, Sacramento, CA 95811  
P 916.552.9000 F 916.552.9007 | www.brea.ca.gov



BREA USE ONLY

## CHANGE NOTIFICATION AND MISCELLANEOUS REQUESTS

- Type or print clearly in blue or black ink and provide an original signature.
- All fees paid must be paid by pre-printed personal check, company check, cashier's check, certified check, money order, or credit card (see form REA 2030 to pay by credit card).
- By statute, all fees submitted are deemed earned upon receipt.
- All out-of-state addresses require a completed and notarized Consent to Service of Process (REA 3006).
- Please refer to <http://www.brea.ca.gov/html/LicensingFees.html> for current license application fees.
- If you have any questions, please write to the address listed or call (916) 552-9000.
- Mail completed application, fee and qualifying documentation to:  
**BUREAU OF REAL ESTATE APPRAISERS**  
Attn: Licensing  
1102 Q Street, Suite 4100  
Sacramento, CA 95811

### PART A - License Request

<b>1. Type of Change or Service Request</b>			
<input type="checkbox"/> Name \$10	<input type="checkbox"/> Business Telephone Number	<input type="checkbox"/> Letter of License History \$40	
<input type="checkbox"/> Business Name \$10	<input type="checkbox"/> Residence Telephone Number	<input type="checkbox"/> Email Address	
<input type="checkbox"/> Mailing Address	<input type="checkbox"/> Issue Duplicate License \$50		
<b>2. License Identification Number</b>		<b>3. Expiration Date</b>	
<b>4. Social Security / Taxpayer I.D. Number</b>			
<b>5. Name (as it Appears on Current License)</b>			
Last		First Middle	
<b>6. New Name</b>			
Last		First Middle	
<b>7. New Business Name</b>			
<b>8. New Mailing Address (Address of Record)</b>			
Address			
City		County	State Zip Code
<b>9. New Business Telephone Number</b>		<b>10. New Residence Telephone Number</b>	
( )		( )	
<b>11. New Email Address</b>			

I certify under penalty of perjury that the foregoing information, and information provided on all attachments, is true and correct and that I have answered each question fully and truthfully and without any purpose of evasion. I understand that providing false information is grounds for denial or revocation of any license and may subject me to disciplinary action and/or criminal prosecution.

Signature

Date

### PART B - Public Member Request - For letter of license history

<b>1. Requesting Party</b>			
Name of Requesting Party			
Address			
City		County	State Zip Code
<b>2. Licensee's Name and License Number</b>			

## INSTRUCTIONS

### PART A

**FEE** - Please refer to <http://www.brea.ca.gov/html/LicensingFees.html> for current license application fees.

**TYPE OF CHANGE** - Check the box that corresponds to the type of change you are requesting.

**LICENSE ID NUMBER** - Enter your license ID number.

**EXPIRATION DATE** - Enter your license expiration date.

**SOCIAL SECURITY / TAXPAYER ID NUMBER** - Enter your Social Security/Taxpayer ID Number.

**NAME** - Enter your name as it appears on your current license.

**ONLY COMPLETE THE SECTION(S) THAT ARE TO BE CHANGED.**

**NEW NAME** - Enter your new name. Legal documentation, such as a court order, supporting your name change is required. A copy of a driver's license or social security card is not acceptable.

**NEW BUSINESS NAME** - Enter your new business name.

**NEW MAILING ADDRESS** - Enter your new mailing address.

**NEW BUSINESS TELEPHONE NUMBER** - Enter your new business telephone number.

**NEW RESIDENCE TELEPHONE NUMBER** - Enter your new residence telephone number.

**NEW EMAIL ADDRESS** - Enter your new email address.

### PART B

**REQUESTING PARTY** - Enter your information here.

**LICENSEE'S NAME AND LICENSE NUMBER** - Enter the licensee's information here.

### Privacy Information

Section 1798.17 of the Civil Code requires this notice be provided when collecting personal or confidential information from individuals. Each individual has the right to review personal information maintained by this Agency, unless access is exempted by law.

Bureau of Real Estate Appraisers  
Custodian of Records  
1102 Q Street, Suite 4100  
Sacramento, CA 95811  
Telephone: (916) 552-9000

General powers of the Chief, Sections 11310 and 11313 of the Business and Professions Code authorizes the maintenance of this information. Business and Professions Code Section 30, Chapter 1361, Section 1, requires each real estate appraiser licensee to initially provide to the Bureau of Real Estate Appraisers his or her social security number or individual taxpayer identification number which will be furnished to the Franchise Tax Board. Your social security number or individual taxpayer identification number shall not be deemed a public record and shall not be open to the public for inspection. The Franchise Tax Board will use your number to establish identification exclusively for tax purposes. The Real Estate Appraisers Law or Regulations of the Chief require applicants to provide the Bureau of Real Estate Appraisers with specific information. If all or any part of the required information is not provided, processing may be delayed. In addition, the Chief may suspend or revoke a license, or in the case of a license applicant, may deny the issuance for misstatements of facts (including a failure to disclose a material fact) in an application for a license. The information requested in this form is primarily used to furnish license status information to the Bureau of Real Estate Appraisers, and to answer inquiries and give information to the public on license status, mailing addresses and actions taken to deny, revoke, restrict or suspend licenses for cause. This information may be transferred to real estate appraisal licensing agencies in other states, law enforcement agencies (City Police, Sheriff's Departments, District Attorneys, Attorney General, F.B.I.), and any other regulatory agencies (included, but not limited to, Department of Business Oversight, Department of Insurance, Bureau of Real Estate, Department of Consumer Affairs, California Bar Association, Appraisal Subcommittee, California Community Colleges Chancellor's Office).



BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY  
GOVERNOR EDMUND G. BROWN JR.

**BUREAU OF REAL ESTATE APPRAISERS**  
1102 Q Street, Suite 4100, Sacramento, CA 95811  
P 916.552.9000 F 916.552.9007 | [www.brea.ca.gov](http://www.brea.ca.gov)



BREA USE ONLY

## ***APPRAISAL MANAGEMENT COMPANY (AMC) CONTROLLING PERSON APPLICATION***

- ▶ Type or print clearly in blue or black ink and provide an original signature.
- ▶ All fees paid must be paid by pre-printed personal check, company check, cashier's check, certified check, money order, or credit card (see form REA 2030 to pay by credit card).
- ▶ By statute, all fees submitted are deemed earned upon receipt.
- ▶ Applications must be submitted with original signatures. Applications with electronic or faxed signatures will not be accepted.
- ▶ All out-of-state addresses require a completed and notarized Consent to Service of Process (REA 3006).
- ▶ Please refer to <http://www.brea.ca.gov/html/LicensingFees.html> for current license application fees.
- ▶ A separate application must be submitted for each Controlling Person listed on the Appraisal Management Company Certificate of Registration Application form REA 5001.
- ▶ If you have any questions, please write to the address listed or call (916) 552-9000.
- ▶ Mail completed application, fee and qualifying documentation to:  
**BUREAU OF REAL ESTATE APPRAISERS**  
1102 Q Street, Suite 4100  
Sacramento, CA 95811

### **PART I: Controlling Person Contact Information**

<b>1. Controlling Person's Name</b>		
Last	First	M.I.
<b>2. Controlling Person's Title or Position</b>		
<b>3. Social Security / Taxpayer ID Number</b>		<b>4. Birth Date</b>
<b>5. Name of Appraisal Management Company</b>		
<b>6. Mailing Address (Address of Record)</b>		
Address		
City		State Zip Code
<b>7. Residence Telephone Number</b>		
<b>8. Email Address (optional)</b>		

### **Please Answer the Following Questions:**

9. Do you currently hold or have you ever held a California Real Estate Appraisers License? ☐ Yes ☐ No

If yes, please enter your license number.

California Real Estate Appraiser License Number

License No.

10. Do you currently hold or have you ever held a real estate appraiser license in another state? ☐ Yes ☐ No

If yes, please list your license number and the state.

Real Estate Appraiser License Number

License No.

State

If you are currently licensed in another state as a real estate appraiser, you will need to submit a **Certificate of License History** or its equivalent, not more than 30 days old, from the state in which you are licensed, as part of this application.

## PART II: CONTROLLING PERSON BACKGROUND INFORMATION

**FINGERPRINT BACKGROUND CHECK:** All controlling person applicants who are **NOT** currently licensed with the Bureau of Real Estate Appraisers (BREA) **MUST** complete the background application process by having their fingerprints taken. If you reside in the State of California, You **MUST** print out and use the Request for Live Scan Service form (BCII 8016). If you reside outside of the State of California, submit two FD-258 fingerprint cards with your application.

### BACKGROUND REVIEW QUESTIONS

- Have you ever used or been known by any name other than, or in addition to, the name listed on this application?  
If yes, list all such other names:  
☐ No ☐ Yes, explain: \_\_\_\_\_
- Have you ever been convicted of, or pled guilty or *nolo contendere* to any criminal or civil offense in the United States, its territories, or a foreign country? This includes every citation, infraction, misdemeanor and/or felony, including traffic violations. You are not required to report convictions that were adjudicated in the juvenile court, convictions under California Health and Safety Code sections 11357(b), (c), (d), (e) or section 11360(b) which are two years old, or traffic infractions resulting in a fine of \$500 or less. Convictions that were later dismissed pursuant to sections, 1203.4, 1203.4a, or 1203.41 of the California Penal Code or equivalent non-California law must be disclosed. If yes, complete "Conviction Details" section below. In addition to completing the "Conviction Details" section below, you must submit a certified copy of the police report and certified copies of the complaint and judgment or the order.  
☐ No ☐ Yes, Complete "Conviction Details" below.
- Are you or have you ever been placed on probation or parole on terms which restricted or limited your contact or dealings with any financial or real estate-related activity or business or otherwise restricted your acting in a fiduciary capacity? If yes, attach a certified copy of the court records, including the complaint, complete docket, judgment and sentence, and probation report and attach a copy of the police report(s) and/or investigating agency records.  
☐ No ☐ Yes, explain: \_\_\_\_\_
- Are there criminal charges pending against you at this time, or are you currently awaiting judgment and sentencing following entry of a plea or jury verdict? If yes, please specify the court in which the matter is pending, the case number and charges, and submit a copy of the police report and a certified copy of the complaint and docket.  
☐ No ☐ Yes, explain: \_\_\_\_\_
- Do you currently hold a professional or vocational license issued by any governmental agency other than the BREA? If yes, please identify the license held, the license number and the issuing agency.  
☐ No ☐ Yes, explain: \_\_\_\_\_
- Have you ever had a professional or vocational license, certificate or registration denied, suspended, restricted, revoked, surrendered or disciplined in any way in this state or any other state? If yes, complete "License Details" section below. In addition to completing the "License Details" section below, you must submit a certified copy of the police report or administrative agency's investigative report and certified copies of the court or administrative agency's docket, complaint, or accusation and judgement or other order.  
☐ No ☐ Yes, Complete "License Details" below.
- Have you ever been or are you currently a Controlling Person or Designated Officer for an Appraisal Management Company in California or any other state?  
☐ No ☐ Yes, Name of the AMC's, and state: \_\_\_\_\_

### CONVICTION DETAILS

Complete one line for each violation and provide explanation below. If you are unable to provide this information, provide all the requested information you can obtain, with an explanation for the missing information. If the conviction status has been subsequently changed or reduced, note that fact in the area provided for additional information. Attachments for additional information should specify which lines you are referring to. **EACH ADDITIONAL SHEET MUST BE SIGNED BY THE APPLICANT.**

\* CODE SECTION VIOLATED (i.e., 1014, 484, ETC.)

\*\* CODE VIOLATED (i.e., VEHICLE CODE, PENAL CODE, ETC.)

\*\*\* DISPOSITION (i.e., PROBATION, PAROLE, FINE, PENDING, ETC.)

\*\*\*\* DISMISSED (pursuant to sections, 1203.4, 1203.4a, or 1203.41 of the California Penal Code)

Court of Conviction (Name and Address)	Arresting Agency (Name and Address)	Date of Conviction	Type of Conviction	* Code Section Violated	** Code Violated	*** Disposition	Case Number	**** Dismissed
<i>Example:</i> Sacramento Cnty. 456 Main St., Sac	Sacramento City Police 123 Main St., Sac	02/20/12	<input type="checkbox"/> Felony <input type="checkbox"/> Other <input checked="" type="checkbox"/> Misdemeanor	23152	Vehicle Code	6 months probation and \$200 fine	1234	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
1.			<input type="checkbox"/> Felony <input type="checkbox"/> Other <input type="checkbox"/> Misdemeanor					<input type="checkbox"/> Yes <input type="checkbox"/> No
2.			<input type="checkbox"/> Felony <input type="checkbox"/> Other <input type="checkbox"/> Misdemeanor					<input type="checkbox"/> Yes <input type="checkbox"/> No
3.			<input type="checkbox"/> Felony <input type="checkbox"/> Other <input type="checkbox"/> Misdemeanor					<input type="checkbox"/> Yes <input type="checkbox"/> No

ADDITIONAL INFORMATION: SPECIFY WHICH LINES YOU ARE REFERRING TO. ATTACH EXTRA SHEETS IF MORE ROOM IS NEEDED. EACH ADDITIONAL SHEET MUST BE SIGNED.

### LICENSE DETAILS

Type of License	License ID No.	License Expiration Date	State
Action (revoked, etc.)	Date of Action	Date Action Terminated	Code Section Violated

ADDITIONAL INFORMATION: ATTACH EXTRA SHEETS IF MORE ROOM IS NEEDED. EACH ADDITIONAL SHEET MUST BE SIGNED AND DATED.

**PART III: APPLICANT DECLARATION**

I, \_\_\_\_\_ (name), certify under penalty of perjury in accordance with California law, that I am a Controlling Person as defined (herein) and duly authorized as such and understand and agree, individually and on behalf of \_\_\_\_\_ (name of AMC), to abide by all federal and California laws applicable to appraisal management companies receiving and maintaining a Certificate of Registration under California law. I declare under penalty of perjury in accordance with California law that I am 18 years of age or older and that the foregoing information and information provided on all attachments is true and correct and that I have answered each question fully and truthfully without any purpose of evasion. I understand that providing false information is grounds for denial or revocation of any certificate of registration and may subject me to disciplinary action and/or criminal prosecution and punishment by imprisonment in state prison for 2, 3, or 4 years pursuant to Penal Code section 126. I understand that any certification of registration issued in conjunction with this application entitles the applicant to act only for the appraisal management company so registered and not in an individual capacity.

I understand and certify that valid service of process on the appraisal management company \_\_\_\_\_ (name of AMC) by BREa also constitutes valid service of process on me as a Controlling Person for \_\_\_\_\_ (name of AMC), as certified by the Designated Officer for \_\_\_\_\_ (name of AMC) in the *Appraisal Management Company Certificate of Registration Application Form REA 5001* submitted by \_\_\_\_\_ (name of AMC), or by a subsequent Designated Officer identified by \_\_\_\_\_ (name of AMC) in an *Appraisal Management Company Change Notification and Miscellaneous Requests Form REA 5011*.

I understand that if I fail to qualify as a Controlling Person for any reason or withdraw this application, the Bureau of Real Estate Appraisers cannot refund the fees remitted with this application.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ at \_\_\_\_\_ (city or county)  
\_\_\_\_\_ (state).

Signature \_\_\_\_\_

Name (please print) \_\_\_\_\_

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of \_\_\_\_\_, County of \_\_\_\_\_,

On \_\_\_\_\_, before me, \_\_\_\_\_ (insert name and title of the officer), personally appeared, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of \_\_\_\_\_ that the foregoing paragraph is true and correct. WITNESS my hand and official seal.

\_\_\_\_\_  
Signature  
(Seal)

**MUST BE SIGNED AND CERTIFIED BY A NOTARY PUBLIC IF EXECUTED OUTSIDE THE STATE OF CALIFORNIA**

## PART V: Instructions

### A. INSTRUCTIONS PART I: *Controlling Person Contact Information*

1. CONTROLLING PERSON'S NAME- List your name. You **must** be listed as a Controlling Person on the *Appraisal Management Company Certificate of Registration Application* Form REA 5001.
2. TITLE OR POSITION - List your title or position.
3. SOCIAL SECURITY/TAXPAYER IDENTIFICATION NUMBER- List your social security or individual taxpayer identification number.
4. BIRTH DATE-List your date of birth.
5. APPRAISAL MANAGEMENT COMPANY-List the name of the appraisal management company for which you are named as a Controlling Person.
6. MAILING ADDRESS - List your address of record. **The information provided is a matter of public record.**
7. RESIDENCE TELEPHONE NUMBER-List your home phone number.
8. EMAIL ADDRESS-List your email address. (optional)
- 9-10. List the state in which you hold a real estate appraiser license and your license number, if applicable. Submit a Certificate of License History or its equivalent, not more than 30 days old, if you hold a real estate appraiser license in another state.

### B. INSTRUCTIONS PART II: *Controlling Person Background Information*

1. FINGERPRINT BACKGROUND CHECK- Applicants not currently licensed or registered with the BREa must submit fingerprints in order to complete the background check portion of this application. Fingerprint background checks are submitted to the Department of Justice via a Request for Live Scan Service form or print cards. If you live in the State of California you must submit your fingerprints using the Request for Live Scan Service Form located on our website at [www.brea.ca.gov](http://www.brea.ca.gov). You must print out this form and visit a Live Scan fingerprinting location to have your fingerprints taken. Keep a copy of this form for your records and submit a copy along with this application to the BREa. If you reside outside of California, you must submit your

fingerprints on two FD-258 fingerprint cards and submit these cards to BREa with your application.

**Note: the Department of Justice no longer accepts fingerprint card submissions on Bid-7 cards from BREa applicants.**

2. BACKGROUND REVIEW QUESTIONS- Completely answer all questions, 1-7 as instructed.

#### FEE

Controlling Person Application Fee

\$80

### C. INSTRUCTIONS PART III: *Applicant Declaration*

1. Business and Professions Code Section 11302(f): "Controlling person" means one or more of the following: (1) An officer or director of an appraisal management company, or an individual who holds a 10 percent or greater ownership interest in an appraisal management company. (2) An individual employed, appointed, or authorized by an appraisal management company that has the authority to enter into a contractual relationship with clients for the performance of appraisal services and that has the authority to enter into

agreements with independent appraisers for the completion of appraisals. (3) An individual who possesses the power to direct or cause the direction of the management or policies of an appraisal management company.

2. APPLICANT DECLARATION - Read, sign and date the declaration presented on page 3. If executed outside of the State of California, this declaration must be signed before and certified by a notary public.

Privacy Information - Section 1798.17 of the Civil Code requires this notice be provided when collecting personal or confidential information from individuals. Each individual has the right to review personal information maintained by this Agency, unless access is exempted by law. General powers of the Chief, Sections 11310 and 11313 of the Business and Professions Code authorizes the maintenance of this information. Business and Professions Code Section 30, Chapter 1361, Section 1, requires each real estate appraiser licensee to initially provide to the Bureau of Real Estate Appraisers his or her social security number or individual taxpayer identification number which will be furnished to the Franchise Tax Board. Your social security number or individual taxpayer identification number shall not be deemed a public record and shall not be open to the public for inspection. The Franchise Tax Board will use your number to establish identification exclusively for tax purposes. The Real Estate Appraisers Law or Regulations of the Chief require applicants to provide the Bureau of Real Estate Appraisers with specific information. If all or any part of the required information is not provided, processing may be delayed. In addition, the Chief may suspend or revoke a license, or in the case of a license applicant, may deny the issuance for misstatements of facts (including a failure to disclose a material fact) in an application for a license. The information requested in this form is primarily used to furnish license status information to the Bureau of Real Estate Appraisers, and to answer inquiries and give information to the public on license status, mailing addresses and actions taken to deny, revoke, restrict or suspend licenses for cause. This information may be transferred to real estate appraisal licensing agencies in other states, law enforcement agencies (City Police, Sheriff's Departments, District Attorneys, Attorney General, F.B.I.), and any other regulatory agencies (included, but not limited to, Department of Business Oversight, Department of Insurance, Bureau of Real Estate, Department of Consumer Affairs, California Bar Association, Appraisal Subcommittee, California Community Colleges Chancellor's Office).

Bureau of Real Estate Appraisers  
Custodian of Records  
1102 Q Street, Suite 4100  
Sacramento, CA 95811  
Telephone: (916) 552-9000





BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY  
GOVERNOR EDMUND G. BROWN JR.

**BUREAU OF REAL ESTATE APPRAISERS**  
1102 Q Street, Suite 4100, Sacramento, CA 95811  
P 916.552.9000 F 916.552.9007 | www.brea.ca.gov



BREA USE ONLY

## APPRAISAL MANAGEMENT COMPANY CONTROLLING PERSON RENEWAL APPLICATION

- ▶ Type or print clearly in blue or black ink and provide an original signature.
- ▶ You must answer each of the following questions by marking "Yes" or "No", whichever is true, after each question.
- ▶ Failure to disclose pertinent information may result in the delay or denial of your application.
- ▶ Providing false information may also subject you to disciplinary action or criminal prosecution.
- ▶ Submit this form with the associated AMC Renewal form (REA 5012).
- ▶ Mail completed application, fees and qualifying documentation to:  
**BUREAU OF REAL ESTATE APPRAISERS**  
1102 Q Street, Suite 4100  
Sacramento, CA 95811

<b>1. Name</b>		<b>M.I.</b>
Last	First	
<b>2. Name of AMC</b>		<b>3. AMC Certificate Number</b>

### BACKGROUND INFORMATION

1. Have you ever used or been known by any name other than, or in addition to, the name listed above on this application?  
☐ No ☐ Yes, explain \_\_\_\_\_
2. Are there criminal charges pending against you at this time, or are you currently awaiting judgment and sentencing following entry of a plea or jury verdict? If yes, please specify on the court in which the matter is pending, the case number and charges, and submit a copy of the police report and a certified copy of the complaint and docket.  
☐ No ☐ Yes, explain \_\_\_\_\_
3. Within the last eight years, have you ever been convicted of, or pled guilty or *nolo contendere* to any criminal or civil offense in the United States, its territories, or a foreign country? This includes every citation, infraction, misdemeanor and/or felony, including traffic violations. You are not required to report convictions that were adjudicated in the juvenile court, convictions under California Health and Safety Code sections 11357(b), (c), (d), (e) or section 11360(b) which are two years old, or traffic infractions resulting in a fine of \$500 or less. Convictions that were later dismissed pursuant to sections, 1203.4, 1203.4a, or 1203.41 of the California Penal Code or equivalent non-California law must be disclosed. If yes, complete "Conviction Details" section below. In addition to completing the "Conviction details" section below, you must submit a certified copy of the police report and certified copies of the complaint and judgment or the order.  
☐ No ☐ Yes, Complete "Conviction Details" below.
4. Do you currently hold a professional or vocational license issued by any governmental agency other than BREA? If yes, please identify the license held, the license number and the issuing agency.  
☐ No ☐ Yes, explain \_\_\_\_\_
5. Have you ever had a professional or vocational license, certificate or registration denied, suspended, restricted, revoked, surrendered or have you been disciplined in any way in this state or any other state? If yes, complete "License Details" section below. In addition to completing the "License Details" section below, you must submit a certified copy of the police report or administrative agency's investigative report and certified copies of the court or administrative agency's docket, complaint, or accusation and judgment or other order.  
☐ No ☐ Yes, Complete "License Details" below.

Conviction and License Details on following page.

CONVICTION DETAILS							
<p>Complete one line for each violation and provide explanation below. If you are unable to provide this information, provide all the requested information you can obtain, with an explanation for the missing information. If the conviction status has been subsequently changed or reduced, note that fact in the area provided for additional information. Attachments for additional information should specify which lines you are referring to.</p> <p><b>EACH ADDITIONAL SHEET MUST BE SIGNED BY THE APPLICANT.</b></p> <p>* CODE SECTION VIOLATED (i.e., 1014, 484, ETC.)    ** CODE VIOLATED (i.e., VEHICLE CODE, PENAL CODE, ETC.)    *** DISPOSITION (i.e., PROBATION, PAROLE, FINE, PENDING, ETC.)</p>							
Court of Conviction (Name and Address)	Arresting Agency (Name and Address)	Date of Conviction	Type of Conviction	* Code Section Violated	** Code Violated	*** Disposition	Case Number
<i>Example:</i> Sacramento Cnty. 456 Main St., Sac	Sacramento City Police 123 Main St., Sac	02/20/12	<input type="checkbox"/> Felony <input type="checkbox"/> Other <input type="checkbox"/> Misdemeanor	23152	Vehicle Code	6 months probation and \$200 fine	1234
1.			<input type="checkbox"/> Felony <input type="checkbox"/> Other <input type="checkbox"/> Misdemeanor				
2.			<input type="checkbox"/> Felony <input type="checkbox"/> Other <input type="checkbox"/> Misdemeanor				
3.			<input type="checkbox"/> Felony <input type="checkbox"/> Other <input type="checkbox"/> Misdemeanor				
ADDITIONAL INFORMATION: SPECIFY WHICH LINES YOU ARE REFERRING TO. ATTACH EXTRA SHEETS IF MORE ROOM IS NEEDED. EACH ADDITIONAL SHEET MUST BE SIGNED AND DATED.							

LICENSE DETAILS			
Type of License	License ID No.	License Expiration Date	State
Action (revoked, etc.)	Date of Action	Date Action Terminated	Code Section Violated
ADDITIONAL INFORMATION: ATTACH EXTRA SHEETS IF MORE ROOM IS NEEDED. EACH ADDITIONAL SHEET MUST BE SIGNED AND DATED.			

I certify under penalty of perjury that the foregoing information, and information provided on all attachments, is true and correct and that I have answered each question fully and truthfully and without any purpose of evasion. I understand that providing false information is grounds for denial or revocation of any license and may subject me to disciplinary action and/or criminal prosecution.

Signature \_\_\_\_\_

Date \_\_\_\_\_

INSTRUCTIONS
--------------

1. **NAME** - List your name.
2. **NAME OF AMC** - The name of the AMC.
3. **AMC CERTIFICATE NUMBER** - The certificate number issued to your AMC by BRE.

#### BACKGROUND INFORMATION -

- 1 - 5. - Answer all of these questions and attach any required additional information to this application.

**Privacy Information** - Section 1798.17 of the Civil Code requires this notice be provided when collecting personal or confidential information from individuals. Each individual has the right to review personal information maintained by this Agency, unless access is exempted by law. General powers of the Chief, Sections 11310 and 11313 of the Business and Professions Code authorizes the maintenance of this information. Business and Professions Code Section 30, Chapter 1361, Section 1, requires each real estate appraiser licensee to initially provide to the Bureau of Real Estate Appraisers his or her social security number or individual taxpayer identification number which will be furnished to the Franchise Tax Board. Your social security number or individual taxpayer identification number shall not be deemed a public record and shall not be open to the public for inspection. The Franchise Tax Board will use your number to establish identification exclusively for tax purposes. The Real Estate Appraisers Law or Regulations of the Chief require applicants to provide the Bureau of Real Estate Appraisers with specific information. If all or any part of the required information is not provided, processing may be delayed. In addition, the Chief may suspend or revoke a license, or in the case of a license applicant, may deny the issuance for misstatements of facts (including a failure to disclose a material fact) in an application for a license. The information requested in this form is primarily used to furnish license status information to the Bureau of Real Estate Appraisers, and to answer inquiries and give information to the public on license status, mailing addresses and actions taken to deny, revoke, restrict or suspend licenses for cause. This information may be transferred to real estate appraisal licensing agencies in other states, law enforcement agencies (City Police, Sheriff's Departments, District Attorneys, Attorney General, F.B.I.), and any other regulatory agencies (included, but not limited to, Department of Business Oversight, Department of Insurance, Bureau of Real Estate, Department of Consumer Affairs, California Bar Association, Appraisal Subcommittee, California Community Colleges Chancellor's Office).

Bureau of Real Estate Appraisers  
Custodian of Records  
1102 Q Street, Suite 4100  
Sacramento, CA 95811  
Telephone: (916) 552-9000



**APPRAISAL MANAGEMENT COMPANY (AMC)  
CHANGE NOTIFICATION AND MISCELLANEOUS REQUESTS**

*Please note that all changes requested on this form must be approved and certified by the Designated Officer of the AMC.  
The Designated Officer (or new Designated Officer) must sign PART III: Change and Request Declaration (top of page 5)*

- Type or print clearly in blue or black ink and provide an original signature.
- All fees paid must be paid by pre-printed personal check, company check, cashier's check, certified check, money order, or credit card (see form REA 2030 to pay by credit card).
- By statute, all fees submitted are deemed earned upon receipt.
- Check all boxes that are applicable.
- Complete all information requested for each box checked.
- Please refer to <http://www.brea.ca.gov/html/LicensingFees.html> for current license application fees.
- If you have any questions, please write to the address listed or call (916) 552-9000.
- Mail completed application, fees and qualifying documentation to:  
**BUREAU OF REAL ESTATE APPRAISERS**  
1102 Q Street, Suite 4100  
Sacramento, CA 95811

**Part I: AMC Information (Information presently on file with the BREA)**

<b>1. Name of AMC</b>		<b>2. AMC Certificate Number</b>	
<b>3. Mailing Address (Address of Record)</b>			
Address			
City		State	Zip Code
<b>4. Business Telephone Number</b>	<b>5. Business Fax Number (optional)</b>	<b>6. Business Email Address (optional)</b>	

**Part II: Information to Be Changed or Requested**

Type of Change				
<input type="checkbox"/> AMC Information Change	<input type="checkbox"/> Add/Remove Controlling Person	\$10	<input type="checkbox"/> Designated Officer Change	\$10
<input type="checkbox"/> AMC DBA Name Change	\$10	<input type="checkbox"/> Change Information to Controlling Person	<input type="checkbox"/> Certificate of Good Standing	\$15
<input type="checkbox"/> Issue Duplicate Certificate	\$50	<input type="checkbox"/> Change Agent for Service of Process	\$10	

**1. Changes to AMC Information.**

▼ Check boxes to indicate fields that are being changed

<input type="checkbox"/> 1. Name <input type="checkbox"/> Legal <input type="checkbox"/> DBA		
<input type="checkbox"/> 2. Mailing Address (Address of Record)		
Address		
City		State    Zip Code
<b>3. Business Telephone Number</b>	<b>4. Business Fax Number (optional)</b>	<b>5. Business Email Address (optional)</b>

## 2. Change for Agent for Service of Process

*This section is to be completed if the AMC is not domiciled in California. Provide the name and contact information for the person or entity authorized as the AMC agent for service of process within California. This agent for service of process must complete the declaration below and have this document notarized prior to submittal.*

Type of Change		
<input type="checkbox"/> New Agent for Service of Process <input type="checkbox"/> New Information for Existing Agent for Service of Process		
<b>1. Name</b>		
Last	First	M.I.
<b>2. Title</b>		
<b>3. Mailing Address</b>		
Address		
City	State	Zip Code
<b>4. Business Telephone Number</b>	<b>5. Business Fax Number (optional)</b>	<b>6. Business Email Address (optional)</b>

I, \_\_\_\_\_ (name), am authorized to act as Agent for service of process in the State of California on behalf of \_\_\_\_\_ (name of AMC), an entity organized and existing under the laws of the State of \_\_\_\_\_ (current resident state), for purposes of \_\_\_\_\_'s (name of AMC) operation as a valid AMC in accordance with California law under Certificate of Registration No. \_\_\_\_\_ (AMC Certificate Number), including all rights and obligations associated therewith, and I do hereby certify:

The complete address within California whereby I, on behalf of \_\_\_\_\_ (name of AMC) may be served with process by the Chief of the Bureau of Real Estate Appraisers or his/her designee is as follows:

Address		
City	State	Zip Code

IN WITNESS WHEREOF, I, \_\_\_\_\_ (Agent Name for service of process) have subscribed my name hereto this \_\_\_\_\_ (day) day of \_\_\_\_\_ (month), \_\_\_\_\_ (year) at \_\_\_\_\_ (city), \_\_\_\_\_ (state).

\_\_\_\_\_  
Signature

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of \_\_\_\_\_, County of \_\_\_\_\_,

On \_\_\_\_\_, before me, \_\_\_\_\_ (insert name and title of the officer), personally appeared, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of \_\_\_\_\_ that the foregoing paragraph is true and correct. WITNESS my hand and official seal.

\_\_\_\_\_  
Signature  
(Seal)

### 3. Controlling Person(s) Changes

#### Addition and Removal of Controlling Person(s)

List the name of each "Controlling Person" of the AMC that is being added or removed for the AMC.

Note: A separate "Appraisal Management Company (AMC) Controlling Person Application" (REA 5002) form and fees must be included for each Controlling Person that is being added.

<input type="checkbox"/> Add <input type="checkbox"/> Remove	1.
<input type="checkbox"/> Add <input type="checkbox"/> Remove	2.
<input type="checkbox"/> Add <input type="checkbox"/> Remove	3.
<input type="checkbox"/> Add <input type="checkbox"/> Remove	4.
<input type="checkbox"/> Add <input type="checkbox"/> Remove	5.
<input type="checkbox"/> Add <input type="checkbox"/> Remove	6.
<input type="checkbox"/> Add <input type="checkbox"/> Remove	7.
<input type="checkbox"/> Add <input type="checkbox"/> Remove	8.
<input type="checkbox"/> Add <input type="checkbox"/> Remove	9.
<input type="checkbox"/> Add <input type="checkbox"/> Remove	10.

#### Information Change for an Existing Controlling Person

▼ Check boxes to indicate fields that are being changed

<input type="checkbox"/> 1. Controlling Person's Name		
Last	First	M.I.
<input type="checkbox"/> 2. Controlling Person's Title or Position		
<input type="checkbox"/> 3. Mailing Address		
Address	State	Zip Code
City		
<input type="checkbox"/> 4. Residence Telephone Number		
<input type="checkbox"/> 5. Email Address (optional)		

#### 4. Change of Designated Officer

List the name of the new Designated Officer

**Note: A separate "Appraisal Management Company (AMC) Controlling Person Application" (REA 5002) form and fees must be included for the Designated Officer to be added unless BREa has an approved Form REA 5002 on file for the new Designated Officer.**

<b>1. New Designated Officer's Name</b>		
Last	First	M.I.
<b>2. New Designated Officer's Social Security/Individual Taxpayer ID Number</b>		<b>Does the new Designated Officer currently hold, or have they ever held a California Real Estate Appraiser License?</b>
		<input type="checkbox"/> Yes <input type="checkbox"/> No License No. _____

I, \_\_\_\_\_ (name of the new Designated Officer), certify under penalty of perjury in accordance with California law, that I am the Designated Officer and duly authorized as such and understand and agree, individually and on behalf of \_\_\_\_\_ (name of AMC), to abide by all federal and California laws applicable to appraisal management companies receiving and maintaining a Certificate of Registration under California law. In addition, I certify that \_\_\_\_\_ (name of AMC) is legally formed pursuant to the applicable state law and, further, that \_\_\_\_\_ (name of AMC) shall comply with all California laws as necessary in order to validly operate in California. I declare under penalty of perjury in accordance with California law that I am 18 years of age or older and that the foregoing information and information provided on all attachments is true and correct and that I have answered each question fully and truthfully and without any purpose of evasion or mental reservation. I understand that providing false information is grounds for denial or revocation of any certificate of registration and may subject me to disciplinary action and/or criminal prosecution and punishment by imprisonment in state prison for 2, 3 or 4 years pursuant to Penal Code section 126.

I also certify, under penalty of perjury in accordance with California law, that \_\_\_\_\_ (name of AMC) will, in accordance with Business and Professions Code section 11345.3, include in all of its contracts with clients for appraisal services in California, provision of each of the following procedures as standard business practices:

- a. Ensuring that all independent contractor or employee appraisers who perform appraisal services for this company in California will possess a California real estate appraiser license in good standing;
- b. Reviewing the work of all independent contractor or employee appraisers to ensure that appraisal services are performed in accordance with the Uniform Standards of Professional Appraisal Practice (USPAP); and
- c. Maintaining, at a minimum, each of the following records for each service request:
  1. The date of receipt of the request;
  2. The name of the person from whom the request was received;
  3. The name of the client for whom the request was made, if different from the name of the person from whom the request was received;
  4. The appraiser or appraisers assigned to perform the requested service; and
  5. The date of delivery of the appraisal product to the client.

I also certify, under penalty of perjury in accordance with California law, as to the following regarding service of process on \_\_\_\_\_ (name of AMC):

- a. That service of process on \_\_\_\_\_ (name of AMC) shall be deemed service of process on each and every Controlling Person individually (as identified by Applicant herein and/or as updated by *Appraisal Management Company Change Notification and Miscellaneous Requests* Form REA 5011, as consistent with the duties and obligations of a Controlling Person within \_\_\_\_\_ (name of AMC).
- b. That the Applicant hereby irrevocably consents that if, in any action commenced against it by the Chief of the Bureau of Real Estate Appraisers or his designee, service of process upon it cannot be made in California after the exercise of due diligence, a valid service may thereupon be made upon it by delivering the process to the Chief of the Bureau of Real Estate Appraisers of the State of California.
- c. That, following such service of process pursuant to the irrevocable consent authorized herein, the Chief of the Bureau of Real Estate Appraisers of the State of California may mail a copy of any such process to the

\_\_\_\_\_ (name of AMC) at the following address:

Address		
City	State	Zip Code

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ at \_\_\_\_\_ (city or county)  
\_\_\_\_\_ (state).

Signature \_\_\_\_\_

Name (please print) \_\_\_\_\_

### Part III: Change and Request Declaration

*All changes made must be approved by the Designated Officer currently on file with BREa.*

*The Designated Officer must complete this section.*

I, \_\_\_\_\_ (name), certify under penalty of perjury in accordance with California law, that I am the Designated Officer and duly authorized as such and understand and agree, individually and on behalf of \_\_\_\_\_ (name of AMC), that the foregoing information and information provided on all attachments is true and correct and that I have answered each question fully and truthfully and without any purpose of evasion. I understand that providing false information is grounds for denial or revocation of any license and may subject me to disciplinary action and/or criminal prosecution and punishment by imprisonment in state prison for 2, 3 or 4 years.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ at \_\_\_\_\_ (city or county) \_\_\_\_\_ (state).

Signature \_\_\_\_\_

Name (please print) \_\_\_\_\_

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of \_\_\_\_\_, County of \_\_\_\_\_,

On \_\_\_\_\_, before me, \_\_\_\_\_ (insert name and title of the officer), personally appeared, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of \_\_\_\_\_ that the foregoing paragraph is true and correct. WITNESS my hand and official seal.

\_\_\_\_\_  
Signature  
(Seal)

**MUST BE SIGNED AND CERTIFIED BY A NOTARY PUBLIC IF EXECUTED OUTSIDE THE STATE OF CALIFORNIA**

## INSTRUCTIONS

**PART I: AMC INFORMATION** - This section MUST be completed.

**PART II: INFORMATION TO BE CHANGED** - Only complete the sections in *Part II* that are to be changed.

- 1. AMC CHANGES** - *Include any changes to the AMC.*
- 2. CHANGE OF AGENT FOR SERVICE OF PROCESS** -- A change of, or changes to an AMC's Agent for Service of Process MUST be notarized by a Notary Public.
- 3. CONTROLLING PERSON(S) CHANGES** - *This section covers changes to the Controlling Persons of an AMC:*

**ADDITION AND REMOVAL OF CONTROLLING PERSON(S)** – List each name of all “Controlling Persons” of the AMC that are being either added or removed to the AMC.

A separate “*Appraisal Management Company (AMC) Controlling Person Application*” (REA 5002) form and fees must be included for each Controlling Person that is being added unless:

- (a) BREa has an approved Form REA 5002 on file for the newly designated Controlling Person; or
- (b) The new Controlling Person holds an active real estate appraiser license with the BREa.

**INFORMATION CHANGE FOR AN EXISTING CONTROLLING PERSON** - Show all changes being made to information for an individual Controlling Person.

- 4. CHANGE OF DESIGNATED OFFICER** - List the name of the new Designated Officer.

A separate “*Appraisal Management Company (AMC) Controlling Person Application*” (REA 5002) form and fees must be included for a Designated Officer that is being added unless:

- (a) BREa has an approved Form REA 5002 on file for the newly designated Controlling Person; or
- (b) The new Controlling Person holds an active real estate appraisal license with the BREa.

**PART III: CHANGE AND REQUEST DECLARATION** -

All changes must be approved by the Designated Officer of the AMC. The Designated Officer MUST complete this section. The definition of Designated Officer can be found at Title 10 of the California Code of Regulations Section 3500(b)(10).

**Privacy Information**

Section 1798.17 of the Civil Code requires this notice be provided when collecting personal or confidential information from individuals. Each individual has the right to review personal information maintained by this Agency, unless access is exempted by law.

Bureau of Real Estate Appraisers  
Custodian of Records  
1102 Q Street, Suite 4100  
Sacramento, CA 95811  
Telephone: (916) 552-9000

General powers of the Chief, Sections 11310 and 11313 of the Business and Professions Code authorizes the maintenance of this information. Business and Professions Code Section 30, Chapter 1361, Section 1, requires each real estate appraiser licensee to initially provide to the Bureau of Real Estate Appraisers his or her social security number or individual taxpayer identification number which will be furnished to the Franchise Tax Board. Your social security number or individual taxpayer identification number shall not be deemed a public record and shall not be open to the public for inspection. The Franchise Tax Board will use your number to establish identification exclusively for tax purposes. The Real Estate Appraisers Law or Regulations of the Chief require applicants to provide the Bureau of Real Estate Appraisers with specific information. If all or any part of the required information is not provided, processing may be delayed. In addition, the Chief may suspend or revoke a license, or in the case of a license applicant, may deny the issuance for misstatements of facts (including a failure to disclose a material fact) in an application for a license. The information requested in this form is primarily used to furnish license status information to the Bureau of Real Estate Appraisers, and to answer inquiries and give information to the public on license status, mailing addresses and actions taken to deny, revoke, restrict or suspend licenses for cause. This information may be transferred to real estate appraisal licensing agencies in other states, law enforcement agencies (City Police, Sheriff's Departments, District Attorneys, Attorney General, F.B.I.), and any other regulatory agencies (included, but not limited to, Department of Business Oversight, Department of Insurance, Bureau of Real Estate, Department of Consumer Affairs, California Bar Association, Appraisal Subcommittee, California Community Colleges Chancellor's Office).





BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY  
GOVERNOR EDMUND G. BROWN JR.

**BUREAU OF REAL ESTATE APPRAISERS**  
1102 Q Street, Suite 4100, Sacramento, CA 95811  
P 916.552.9000 F 916.552.9007 | [www.brea.ca.gov](http://www.brea.ca.gov)



BREA USE ONLY

## APPRAISAL MANAGEMENT COMPANY RENEWAL APPLICATION

- Type or print clearly in blue or black ink and provide an original signature.
- All fees paid must be paid by pre-printed personal check, company check, cashier's check, certified check, money order, or credit card (see form REA 2030 to pay by credit card).
- By statute, all fees submitted are deemed earned upon receipt.
- Please submit Certificate of Registration renewal fee of \$1,600 with this application.
- Please refer to <http://www.brea.ca.gov/html/LicensingFees.html> for current license application fees.
- If you have any question, please write to the address listed or call (916) 552-9000.
- Mail completed application, fee and qualifying documentation to:  
**BUREAU OF REAL ESTATE APPRAISERS**  
1102 Q Street, Suite 4100  
Sacramento, CA 95811

### PART A - AMC INFORMATION

1. Name		2. AMC Certificate No.	
3. Mailing Address (Address of Record)		<input type="checkbox"/> Check if Change	
Address			
City		State	Zip Code
4. Business Telephone Number	<input type="checkbox"/> Check if Change	5. Business Fax Number (optional)	<input type="checkbox"/> Check if Change
6. Business Email Address (optional) <input type="checkbox"/> Check if Change			

### PART B - DESIGNATED OFFICER

1. Name		
Last	First	M.I.
2. Title		
3. Proof of USPAP Completion		

- Attach to this form the Designated Controlling Officer's completion certificate of the 7-hour National USPAP course taken for this renewal period.

# PART C - DESIGNATED OFFICER BACKGROUND INFORMATION

4. Have you ever used or been known by any name other than, or in addition to, the name listed on this application? If yes, list all such other names.  
☐ No ☐ Yes, explain: \_\_\_\_\_
5. Within the last eight years, have you been convicted of, or pled guilty or *nolo contendere* to any criminal or civil offense in the United States, its territories, or a foreign country? This includes every citation, infraction, misdemeanor and/or felony, including traffic violations. Convictions that were adjudicated in the juvenile court or convictions under California Health and Safety Code sections 11357(b), (c), (d), (e) or section 11360(b) which are two years old should not be reported. Convictions that were later dismissed pursuant to sections, 1203.4, 1203.4a, or 1203.41 of the California Penal Code or equivalent non-California law must be disclosed. If yes, complete "Conviction Details" section below. In addition to completing the "Conviction Details" section below, you must submit a certified copy of the police report or administrative agency's investigative report and certified copies of the court or administrative agency's docket, complaint, or accusation and judgement or other order.  
☐ No ☐ Yes, complete "Conviction Details" below.
6. Are there criminal charges pending against you at this time, or are you currently awaiting judgement and sentencing following entry of a plea or jury verdict? If yes, please specify the court in which the matter is pending, the case number and charges, and submit a copy of the police report and a certified copy of the complaint and docket.  
☐ No ☐ Yes, explain: \_\_\_\_\_
7. Do you currently hold a professional or vocational license issued by any other governmental agency? If yes, please identify the license held, the license number and the issuing agency.  
☐ No ☐ Yes, explain: \_\_\_\_\_
8. Have you ever had a professional or vocational license, certificate or registration denied, suspended, restricted, revoked, surrendered or have you been disciplined in any way in this state or any other state? If yes, complete "License Details" section below. In addition to completing the "License Details" section below, you must submit a certified copy of the police report or administrative agency's investigative report and certified copies of the court or administrative agency's docket, complaint, or accusation and judgement or other order.  
☐ No ☐ Yes, complete "License Details" below.
9. Controlling Persons Information:
  - ▶ List the name of each Controlling Person of the AMC Including the Designated Officer. Refer to *AMC Controlling Person Application* (REA 5002) for a definition of "Controlling Person".
  - ▶ Each Controlling Person must complete a *Controlling Person Renewal Questionnaire* (REA 5013) and attach it to this AMC Renewal Application.

Designated Officer	
1. _____	2. _____
3. _____	4. _____
5. _____	6. _____
7. _____	8. _____
9. _____	10. _____

## CONVICTION DETAILS

Complete one line for each violation and provide explanation below. If you are unable to provide this information, provide all the requested information you can obtain, with an explanation for the missing information. If the conviction status has been subsequently changed or reduced, note that fact in the area provided for additional information. Attachments for additional information should specify which lines you are referring to. **EACH ADDITIONAL SHEET MUST BE SIGNED BY THE APPLICANT.**

\* CODE SECTION VIOLATED (i.e., 101.4, 48.4, ETC)

\*\*\* DISPOSITION (i.e., PROBATION, PAROLE, FINE, PENDING, ETC.)

\*\* CODE VIOLATED (i.e., VEHICLE CODE, PENAL CODE, ETC.)

\*\*\*\* DISMISSED (pursuant to sections, 1203.4, 1203.4a, or 1203.41 of the California Penal Code)

Court of Conviction (Name and Address)	Arresting Agency (Name and Address)	Date of Conviction	Type of Conviction	* Code Section Violated	** Code Violated	*** Disposition	Case Number	**** Dismissed
<i>Example:</i> Sacramento Cnty. 456 Main St., Sac	Sacramento City Police 123 Main St., Sac	02/20/12	<input type="checkbox"/> Felony <input type="checkbox"/> Other <input checked="" type="checkbox"/> Misdemeanor	23152	Vehicle Code	6 months probation and \$200 fine	1234	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
1. _____	_____	_____	<input type="checkbox"/> Felony <input type="checkbox"/> Other <input type="checkbox"/> Misdemeanor	_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. _____	_____	_____	<input type="checkbox"/> Felony <input type="checkbox"/> Other <input type="checkbox"/> Misdemeanor	_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. _____	_____	_____	<input type="checkbox"/> Felony <input type="checkbox"/> Other <input type="checkbox"/> Misdemeanor	_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

ADDITIONAL INFORMATION: SPECIFY WHICH LINES YOU ARE REFERRING TO. ATTACH EXTRA SHEETS IF MORE ROOM IS NEEDED. EACH ADDITIONAL SHEET MUST BE SIGNED.

## LICENSE DETAILS

Type of License	License ID No.	License Expiration Date	State
Action (revoked, etc.)	Date of Action	Date Action Terminated	Code Section Violated

ADDITIONAL INFORMATION: ATTACH EXTRA SHEETS IF MORE ROOM IS NEEDED. EACH ADDITIONAL SHEET MUST BE SIGNED.

I certify under penalty of perjury that the foregoing information and information provided on all attachments is true and correct and that I have answered each question fully and truthfully and without any purpose of evasion. I understand that providing false information is grounds for denial or revocation of any license and may subject me to disciplinary action and/or criminal prosecution.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**MUST BE SIGNED AND CERTIFIED BY A NOTARY PUBLIC IF EXECUTED OUTSIDE THE STATE OF CALIFORNIA**

## INSTRUCTIONS

### PART A - AMC INFORMATION

1. **NAME** - The name of the appraisal management company.
2. **AMC CERTIFICATE NUMBER** - The certificate number issued to your AMC by BREa.
3. **MAILING ADDRESS** - The AMC's address of record.  
**The information required is a matter of public record.**
4. **BUSINESS TELEPHONE NUMBER** - The AMC's business telephone number. **The information required is a matter of public record.**
5. **BUSINESS FAX NUMBER** - The AMC's business fax number. (optional)
6. **BUSINESS EMAIL ADDRESS** - The AMC's Email address. (optional)

### PART B - DESIGNATED OFFICER INFORMATION

1. **NAME** - Your name as it appears on your AMC certificate.
2. **TITLE** - Your title within the AMC.
3. **PROOF OF USPAP COMPLETION** - Attach to this form the Designated Officer's completion certificate of the 7-hour National USPAP course taken for this renewal period.
- 4-8. **BACKGROUND QUESTIONS** - Please answer all of these questions and attach any required additional information to this application.
9. **CONTROLLING PERSONS INFORMATION** - List each name of all "Controlling Persons" of the AMC including the Designated Officer. Refer to Business and Professions Code Section 11302(f) for a definition of "Controlling Person".

**SIGNATURE OF APPLICANT** - Original signature and date required.

### Privacy Information

Section 1798.17 of the Civil Code requires this notice be provided when collecting personal or confidential information from individuals. Each individual has the right to review personal information maintained by this Agency, unless access is exempted by law.

**Bureau of Real Estate Appraisers**  
**Custodian of Records**  
**1102 Q Street, Suite 4100**  
**Sacramento, CA 95811**  
**Telephone: (916) 552-9000**

General powers of the Chief, Sections 11310 and 11313 of the Business and Professions Code authorizes the maintenance of this information. Business and Professions Code Section 30, Chapter 1361, Section 1, requires each real estate appraiser licensee to initially provide to the Bureau of Real Estate Appraisers his or her social security or individual taxpayer identification number which will be furnished to the Franchise Tax Board. Your social security or individual taxpayer identification number shall not be deemed a public record and shall not be open to the public for inspection. The Franchise Tax Board will use your number to establish identification exclusively for tax purposes. The Real Estate Appraisers Law or Regulations of the Chief require applicants to provide the Bureau of Real Estate Appraisers with specific information. If all or any part of the required information is not provided, processing may be delayed. In addition, the Chief may suspend or revoke a license, or in the case of a license applicant, may deny the issuance for misstatements of facts (including a failure to disclose a material fact) in an application for a license. The information requested in this form is primarily used to furnish license status information to the Bureau of Real Estate Appraisers, and to answer inquiries and give information to the public on license status, mailing addresses and actions taken to deny, revoke, restrict or suspend licenses for cause. This information may be transferred to real estate appraisal licensing agencies in other states, law enforcement agencies (City Police, Sheriff's Departments, District Attorneys, Attorney General, F.B.I.), and any other regulatory agencies (including, but not limited to, Department of Business Oversight, Department of Insurance, Bureau of Real Estate, Department of Consumer Affairs, California Bar Association, Appraisal Subcommittee, California Community Colleges Chancellor's Office).

### FEES

Application Review Fee	\$150
Registration Fee	\$1600



BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY  
GOVERNOR EDMUND G. BROWN JR.

**BUREAU OF REAL ESTATE APPRAISERS**  
1102 Q Street, Suite 4100, Sacramento, CA 95811  
P 916.552.9000 F 916.552.9007 | [www.brea.ca.gov](http://www.brea.ca.gov)



BREA USE ONLY

### APPLICATION FOR RECIPROCAL LICENSE

- ▶ Type or print clearly in blue or black ink and provide an original signature.
- ▶ All fees paid must be paid by pre-printed personal check, company check, cashier's check, certified check, money order, or credit card (see form REA 2030 to pay by credit card)
- ▶ By statute, all fees submitted are deemed earned upon receipt.
- ▶ All out-of-state addresses require a completed and notarized Consent to Service of Process (REA 3006).

- ▶ Please refer to <http://www.brea.ca.gov/html/LicensingFees.html> for current license application fees.
- ▶ If you have any questions please write to the address listed or call (916) 552-9000.
- ▶ Mail completed application, fee and qualifying documentation to:  
**BUREAU OF REAL ESTATE APPRAISERS**  
1102 Q Street, Suite 4100  
Sacramento, CA 95811

#### PART A - APPLICANT INFORMATION

- ☐ Check this box if you are currently serving or have ever served in the United States military (Please submit proof of current or former military service).
- ☐ Check this box if you are married to, or are in a domestic partnership or other legal union with an active member of the United States military assigned to active duty in California (Please submit proof of marriage, domestic partnership, or other legal union with an active member of the military).

##### 1. Level of License for which you are applying

☐ Residential License \$485      ☐ Certified Residential \$535      ☐ Certified General \$535

##### 2. State of Issuance of License

##### 3. License Number

##### 4. License Expiration Date

##### 5. Name

Last

First

Middle

##### 6. Gender

##### 7. Height

##### 8. Weight

##### 9. Eye Color

##### 10. Hair Color

##### 11. Birthdate

☐ Male    ☐ Female

##### 12. Driver's License Number

State

##### 13. Social Security / Taxpayer ID Number

##### 14. Business Name

##### 15. Mailing Address (Address of Record)

Address

City

County

State

Zip Code

##### 16. Business Telephone Number

##### 17. Residence Telephone Number

##### 18. Email Address (optional)

##### 19. Color Photo

##### 20. Please Answer the Following Questions

A. Have you previously submitted an application to BREA?

☐ No    ☐ Yes

B. Do you currently hold, or have you previously held a California Real Estate Appraiser license?

☐ No    ☐ Yes, License Number \_\_\_\_\_

#### IMPORTANT

1. **SIGN** (on the back) **of the** 2" x 2" color photo of passport quality.
2. Staple **HERE**.

**PART B - APPLICANT BACKGROUND INFORMATION**

1. Have you ever used or been known by any name other than, or in addition to, the name listed on Part A of this application?  
☐ No ☐ Yes, explain \_\_\_\_\_
2. Are there criminal charges pending against you at this time, or are you currently awaiting judgment and sentencing following entry of a plea or jury verdict? If yes, please specify the court in which the matter is pending, the case number and charges, and submit a copy of the police report and a certified copy of the complaint and docket.  
☐ No ☐ Yes, explain \_\_\_\_\_
3. Have you ever been convicted of, or pled guilty or *nolo contendere* to any criminal or civil offense in the United States, its territories, or a foreign country? This includes every citation, infraction, misdemeanor and/or felony, including traffic violations. You are not required to report convictions that were adjudicated in the juvenile court, convictions under California Health and Safety Code sections 11357(b), (c), (d), (e) or section 11360(b) which are two years old, or traffic infractions resulting in a fine of \$500 or less. Convictions that were later dismissed pursuant to sections, 1203.4, 1203.4a, or 1203.41 of the California Penal Code or equivalent non-California law must be disclosed. If yes, complete "Conviction Details" section below. In addition to completing the "Conviction details" section below, you must submit a certified copy of the police report and certified copies of the complaint and judgment or the order.  
☐ No ☐ Yes, complete "Conviction Details" below.
4. Do you currently hold a professional or vocational license issued by any governmental agency other than BREA? If yes, please identify the license held, the license number and the issuing agency.  
☐ No ☐ Yes, explain \_\_\_\_\_
5. Have you ever had a professional or vocational license, certificate or registration denied, suspended, restricted, revoked, surrendered or disciplined in any way in this state or any other state? If yes, complete "License Details" section below. In addition to completing the "License Details" section below, you must submit a certified copy of the police report or administrative agency's investigative report and certified copies of the court or administrative agency's docket, complaint, or accusation and judgment or other order.  
☐ No ☐ Yes, complete "License Details" below.

**CONVICTION DETAILS**

Complete one line for each violation and provide explanation below. If you are unable to provide this information, provide all the requested information you can obtain, with an explanation for the missing information. If the conviction status has been subsequently changed or reduced, note that fact in the area provided for additional information. Attachments for additional information should specify which lines you are referring to. **EACH ADDITIONAL SHEET MUST BE SIGNED BY THE APPLICANT.**

\* CODE SECTION VIOLATED (i.e., 1014, 484, ETC.)

\*\*\* DISPOSITION (i.e., PROBATION, PAROLE, FINE, PENDING, ETC.)

\*\* CODE VIOLATED (i.e., VEHICLE CODE, PENAL CODE, ETC.)

\*\*\*\* DISMISSED (pursuant to sections, 1203.4, 1203.4a, or 1203.41 of the California Penal Code)

Court of Conviction (Name and Address)	Arresting Agency (Name and Address)	Date of Conviction	Type of Conviction	* Code Section Violated	** Code Violated	*** Disposition	Case Number	**** Dismissed
Example: Sacramento Cnty. 456 Main St., Sac	Sacramento City Police 123 Main St., Sac	02/20/12	<input type="checkbox"/> Felony <input type="checkbox"/> Other <input checked="" type="checkbox"/> Misdemeanor	23152	Vehicle Code	6 months probation and \$200 fine	1234	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
1.			<input type="checkbox"/> Felony <input type="checkbox"/> Other <input type="checkbox"/> Misdemeanor					<input type="checkbox"/> Yes <input type="checkbox"/> No
2.			<input type="checkbox"/> Felony <input type="checkbox"/> Other <input type="checkbox"/> Misdemeanor					<input type="checkbox"/> Yes <input type="checkbox"/> No
3.			<input type="checkbox"/> Felony <input type="checkbox"/> Other <input type="checkbox"/> Misdemeanor					<input type="checkbox"/> Yes <input type="checkbox"/> No

ADDITIONAL INFORMATION: SPECIFY WHICH LINES YOU ARE REFERRING TO. ATTACH EXTRA SHEETS IF MORE ROOM IS NEEDED. EACH ADDITIONAL SHEET MUST BE SIGNED.

**LICENSE DETAILS**

Type of License	License ID No.	License Expiration Date	State
Action (revoked, etc.)	Date of Action	Date Action Terminated	Code Section Violated

ADDITIONAL INFORMATION: ATTACH EXTRA SHEETS IF MORE ROOM IS NEEDED. EACH ADDITIONAL SHEET MUST BE SIGNED AND DATED.

**BACKGROUND CHECK**

The State of California requires that all applicants submit for a background check. California resident applicants must have their fingerprints taken at any participating LiveScan location using form *BCII 8016*. For a list of LiveScan fingerprinting locations, please visit:

<http://caag.state.ca.us/fingerprints/publications/contact.htm>

Non-California applicants must have their fingerprints taken on two *FD-258 (Rev. 9-9-13)* cards and should submit both with this application.

I certify under penalty of perjury that the foregoing information, and information provided on all attachments, is true and correct and that I have answered each question fully and truthfully and without any purpose of evasion. I understand that providing false information is grounds for denial or revocation of any license and may subject me to disciplinary action and/or criminal prosecution.

Signature

Date

## INSTRUCTIONS

### PART A

1. **APPLICATION LEVEL** - Mark the box for the level for which you wish to apply. Mark one box only. You may not apply for a license level higher than the level currently held in your issuing state.
2. **STATE OF ISSUANCE OF LICENSE** - Name of the state in which your current license was issued.
3. **LICENSE NUMBER** - Your current license number.
4. **LICENSE EXPIRATION DATE** - The Expiration date of your current license.
5. **NAME** - Your name.
6. **SEX** - Mark the appropriate box.
7. **HEIGHT** - Your height in feet and inches. Example: 5' 8"
8. **WEIGHT** - Your weight in pounds. Example: 150 lbs.
9. **EYE COLOR** - Do not abbreviate.
10. **HAIR COLOR** - Do not abbreviate.
11. **BIRTHDATE** - Your date of birth. (mm/dd/yyyy)
12. **DRIVER'S LICENSE NUMBER** - Your driver's license number, including the issuing state.
13. **SOCIAL SECURITY/TAXPAYER IDENTIFICATION NUMBER** - Enter your social security or individual taxpayer identification number. **BREA cannot issue a permit without a Social Security or Individual Taxpayer Identification Number.**
14. **BUSINESS NAME** - The name of your business or employer name. **The information required is a matter of public record.**
15. **MAILING ADDRESS** - Your address of record. **The information required is a matter of public record.**
16. **BUSINESS TELEPHONE NUMBER** - Your business telephone number. **The information required is a matter of public record.**
17. **RESIDENCE TELEPHONE NUMBER** - Your home telephone number.
18. **EMAIL ADDRESS** - Your email address.
19. **COLOR PHOTO** - One color 2" x 2" photo of passport quality, of your head and shoulders only, is required. The photo must have been taken within the last 60 days. Sign and date (in ink) on the back of the photo. Staple on the space provided.
20. **QUESTIONS** -
  - A. Mark "yes" if you have previously submitted an application to BREA.
  - B. If you currently or have previously held a California Real Estate Appraisers license, mark "yes" and provide the license number in the space provided.

### PART B

**1 - 5. BACKGROUND QUESTIONS** - Answer all of these questions and attach any required additional information to this application.

**BACKGROUND CHECK** - California resident applicants must have their fingerprints taken at any participating LiveScan location using form *BCII 8026*. Non-California residents must have their fingerprints taken on two *FD-258 (Rev. 9-9-13)* cards and submitted with this application.

**SIGNATURE OF APPLICANT** - Original signature and date required.

### Privacy Information

Section 1798.17 of the Civil Code requires this notice be provided when collecting personal or confidential information from individuals. Each individual has the right to review personal information maintained by this Agency, unless access is exempted by law.

Bureau of Real Estate Appraisers  
Custodian of Records  
1102 Q Street, Suite 4100  
Sacramento, CA 95811  
Telephone: (916) 552-9000

General powers of the Chief, Sections 11310 and 11313 of the Business and Professions Code authorizes the maintenance of this information. Business and Professions Code Section 30, Chapter 1361, Section 1, requires each real estate appraiser licensee to initially provide to the Bureau of Real Estate Appraisers his or her social security number or individual taxpayer identification number which will be furnished to the Franchise Tax Board. Your social security number or individual taxpayer identification number shall not be deemed a public record and shall not be open to the public for inspection. The Franchise Tax Board will use your number to establish identification exclusively for tax purposes. The Real Estate Appraisers Law or Regulations of the Chief require applicants to provide the Bureau of Real Estate Appraisers with specific information. If all or any part of the required information is not provided, processing may be delayed. In addition, the Chief may suspend or revoke a license, or in the case of a license applicant, may deny the issuance for misstatements of facts (including a failure to disclose a material fact) in an application for a license. The information requested in this form is primarily used to furnish license status information to the Bureau of Real Estate Appraisers, and to answer inquiries and give information to the public on license status, mailing addresses and actions taken to deny, revoke, restrict or suspend licenses for cause. This information may be transferred to real estate appraisal licensing agencies in other states, law enforcement agencies (City Police, Sheriff's Departments, District Attorneys, Attorney General, F.B.I.), and any other regulatory agencies (included, but not limited to, Department of Business Oversight, Department of Insurance, Bureau of Real Estate, Department of Consumer Affairs, California Bar Association, Appraisal Subcommittee, California Community Colleges Chancellor's Office).



Rec'd  
App Rev  
FP

OREA USE ONLY

DSS  
Overpay  
Misc

Type Remit

☐ CC  
☐ MO  
☐ PO

## REQUEST FOR TEMPORARY PRACTICE PERMIT

Read All Directions On the Reverse Side Prior To Completing This Form.

### 1. Type of Application ( Mark one box only )

☐ License

Residential 1 - 4 units up to a transaction value of \$250,000 complex or \$1,000,000 non-complex

☐ Certified Residential

Any residential, 1 - 4 units, without regard to complexity or transaction value

☐ Certified General

Any transaction without regard to type complexity or value

### 2. Name to Appear on Permit

Last

First

Middle

### 3. Business Name and Address of Record (Do not list a P.O. Box, Rural Route or Star Route)

Name of Business

Number, Street and Suite Number

City

County

State

Zip Code

### 4. Mailing Address

Number, Street and Suite Number

City

County

State

Zip Code

### 5. Physical Home Address (Do not list a P.O. Box, Rural Route or Star Route)

Number, Street and Suite Number

City

County

State

Zip Code

### 6. State Currently Licensed

### 7. Expiration Date

### 8. Business Telephone Number

### 9. Home Telephone Number

### 10. Social Security Number

### 11. Driver's License Number

### 12. Date of Birth

### 13. Current or Expired California Real Estate Appraisers License

None

Yes

License Number

I, \_\_\_\_\_ (name), declare under penalty of perjury that the foregoing information and information provided on all attachments is true and correct and that I have answered each question fully and truthfully and without any purpose of evasion or mental reservation. I understand that providing false information is grounds for denial or revocation of any license and may subject me to disciplinary action and/or criminal prosecution and punishment by imprisonment in state prison for 2, 3 or 4 years.

Executed this \_\_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_ (city or county) \_\_\_\_\_ (state).

Signature \_\_\_\_\_

Name (please print) \_\_\_\_\_

**MUST BE SIGNED AND CERTIFIED BY A NOTARY PUBLIC IF EXECUTED OUTSIDE THE STATE OF CALIFORNIA**

OREA USE ONLY

Comments:

Lic. Type:  
Sig:

Con to Serv:  
Let G std:

Let Eng:

Permit Issued By:

Date:

## READ THE FOLLOWING INFORMATION PRIOR TO COMPLETING THIS FORM

- Do not write in the shaded areas.
- Type or write clearly in blue or black ink.
- Applications must be legible and contain an original signature.
- Submit a separate application for each permit requested.
- Submit an \$80 fee for each permit requested. In addition a \$10 child support review fee is required for each application.
- All fees must be paid by pre-printed personal check, company check, cashier's check, certified check, money order or government purchase order.
- Fees cannot be refunded. By statute, all fees submitted are deemed earned upon receipt.
- Out-of-state addresses require a completed and notarized Consent to Service of Process (REA 3006).
- Submit a certified letter of license history from the issuing state or territory which is not more than 30 days old.
- Should the applicant's home state license expire less than one year from the issuance date of the Temporary Practice Permit, the term of the Temporary Practice Permit shall be extended for up to one year from its initial date of issuance upon proof of renewal of the applicant's home state license. The term of the Temporary Practice Permit shall not be extended beyond one year from the initial date of issuance.
- Submit a copy of the letter of engagement, contract or other document provided to you by the institution or individual as evidence of the work to be performed. If the assignment was entirely verbal, describe in writing the appraisal assignment to be performed.
- Sign and date this form prior to submittal.
- If you have any questions, please write to the address listed below or call (916) 552-9000.
- Mail completed application, all fees and required documents to:

**OFFICE OF REAL ESTATE APPRAISERS**  
**1102 Q Street, Suite 4100**  
**Sacramento, CA 95811**

## INSTRUCTIONS

- 1. TYPE OF APPLICATION** -- Mark the box for the permit you wish issued. Your license from the issuing state or territory must equal or exceed the level for which you are applying.
- 2. NAME TO APPEAR ON PERMIT** -- Your name as you wish it to appear on the permit.
- 3. BUSINESS ADDRESS OF RECORD** -- The name of your business or employer name. The physical business address of record. Do not list a P.O. Box, Rural Route or Star Route. Information required is public record.
- 4. MAILING NAME AND ADDRESS OF RECORD** -- Your mailing address if different than the business address. Information required is public record.
- 5. PHYSICAL HOME ADDRESS** -- The physical location of your home address. Do not list a P.O. Box, Rural Route or Star Route.
- 6. STATE CURRENTLY LICENSED** -- The state or states in which you currently hold a real estate appraisal license.
- 7. EXPIRATION DATE** -- The expiration date of your current license.
- 8. BUSINESS TELEPHONE NUMBER** -- Your business telephone number. Information required is public record.
- 9. HOME TELEPHONE NUMBER** -- Your home telephone number.
- 10. SOCIAL SECURITY NUMBER** -- Your social security number is mandatory. OREA cannot issue licenses without a social security number issued by the U.S. Social Security Administration (Business and Professions Code 11340).
- 11. DRIVER'S LICENSE NUMBER** -- Your driver's license number and the state of issuance.
- 12. DATE OF BIRTH** -- Your date of birth.
- 13. PREVIOUS CALIFORNIA APPRAISER LICENSE** -- Indicate if you have ever held a California Appraiser License. If the answer is "yes", list the license number.





## INITIAL APPLICATION

*Read All Directions Prior to Completing This Application*

### PART A

#### 1. Application Level (mark only one box)

Trainee License      Residential License      Certified Residential      Certified General

#### 2. Name

Last      First      Middle

#### 3. Sex

Male      Female

#### 4. Height

#### 5. Weight

#### 6. Eye Color

#### 7. Hair Color

#### 8. Birthdate

#### 9. Drivers License Number

#### 10. Social Security Number

#### 11. Additional Social Security Numbers

#### 12. Business Name and Address of Record

(Do not list a P.O. Box, Rural Route or Star Route)

Name of Business

Number, Street and Suite Number

City

County

State

Zip Code

#### 13. Mailing Address

Number, Street and Suite Number

City

County

State

Zip Code

#### 14. Physical Home Address

(Do not list a P.O. Box, Rural Route or Star Route)

Number, Street and Suite Number

City

County

State

Zip Code

#### 15. Business Telephone Number

(      )

#### 16. Home Telephone Number

(      )

#### 17. Color Photo

#### 18. Please Answer the Following Questions

#### Important - please note:

1. Please **SIGN** (across the bottom) **two** 2" x 2" color photos of passport quality

2. Paste one **HERE**

3. Paperclip the other to the front of this document

- A. Have you previously submitted an application to OREA?  
No      Yes
- B. Do you currently or have you previously held a California Real Estate Appraisers license?  
No      Yes      License Number: \_\_\_\_\_
- C. Do you currently or have you previously held a Real Estate Appraisers license in another state?  
No      Yes      State: \_\_\_\_\_  
License Number: \_\_\_\_\_
- If yes, an out of state letter of license history must be forwarded. Please indicate if the request has been made:      No      Yes

FOR OREA USE ONLY

Comments

Prints:      Y      N      NA      F-1      Y      N      NA  
Initial App:      Y      N      NA      Resolved      Y      N      NA  
BI Complete      Y      N      NA      F-1      Y      N      NA  
Resolved      Y      N      NA

By:      Date  
**INITIAL REQ MET**

## PART B-APPLICANT BACKGROUND INFORMATION

### INSTRUCTIONS

- YOU MUST ANSWER EACH OF THE FOLLOWING QUESTIONS BY WRITING "YES" OR "NO", WHICHEVER IS TRUE, AFTER EACH QUESTION.
- ALL "YES" ANSWERS MUST BE EXPLAINED ON A SEPARATE SHEET OF PAPER WHICH YOU MUST ATTACH.
- FAILURE TO ANSWER ALL QUESTIONS OR FAILURE TO ANSWER ANY QUESTION TRUTHFULLY MAY RESULT IN THE DELAY OR DENIAL OF YOUR APPLICATION.
- PROVIDING FALSE INFORMATION MAY ALSO SUBJECT YOU TO DISCIPLINARY ACTION OR CRIMINAL PROSECUTION

1. Have you ever used or been known by any name other than, or in addition to, the name listed on the reverse side of this application? If yes, list all such other names.

Applicant's answer \_\_\_\_\_

2. Have you resided outside the State of California at any time during the past 5 years? If yes, list all addresses at which you resided outside of California during this period.

Applicant's answer \_\_\_\_\_

3. Have you ever been convicted in California or anywhere else of a criminal offense other than a minor traffic offense? If yes, please indicate all such offenses including the date and location of conviction. For purposes of this question, a minor traffic offense is one for which the maximum fine which could have been imposed is \$100 or less.

To expedite review of your application, please attach a copy of the police report and a certified copy of the the court docket, complaint and judgement showing the final disposition (sentence) of the case.

NOTE: Termination of probation and dismissal of the matter pursuant to Penal Code Section 1203.4 does not relieve you of the requirement to disclose any conviction when applying for a license issued by the Office of Real Estate Appraisers.

Applicant's answer \_\_\_\_\_

4. Are you now or have you ever been placed on probation or parole or terms which restricted or limited your contact or dealings with any financial or real estate related activity or business or otherwise restricted your acting in a fiduciary capacity?

To expedite review of your application, please attach a certified copy of the court records, including the complaint, complete docket, judgement and sentence, and probation report and attach a copy of the police report(s) and/or investigating agency records.

Applicant's answer \_\_\_\_\_

5. Have you ever been prohibited from participating in the affairs of any insured depository institution pursuant to Section 19(a) of the Federal Deposit Insurance Act?

Applicant's answer \_\_\_\_\_

6. Do you presently have criminal charges pending before any court of law? If so, please specify the court in which the matter is pending, the case number and charges and submit a copy of the police report, and a certified copy of the complaint and docket.

Applicant's answer \_\_\_\_\_

7. Do you currently hold a professional or vocational license issued by any other governmental agency? If yes, please identify the license held, the license number and the issuing agency.

Applicant's answer \_\_\_\_\_

8. Have you ever been disciplined or had a penalty imposed by any governmental agency, including OREA, with respect to your activities as a licensee of that agency? Attach a copy of the police report(s) and/or investigating agency records.

Applicant's answer \_\_\_\_\_

## APPLICANT DECLARATION

I, \_\_\_\_\_ (name), declare under penalty of perjury that the foregoing information and information provided on all attachments is true and correct and that I have answered each question fully and truthfully and without any purpose of evasion or mental reservation. I understand that providing false information is grounds for denial or revocation of any license and may subject me to disciplinary action and/or criminal prosecution and punishment by imprisonment in state prison for 2, 3 or 4 years.

Executed this \_\_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_ (city or county)  
(state)

Signature

Name (please print)

**MUST BE SIGNED BEFORE AND CERTIFIED BY A NOTARY PUBLIC IF EXECUTED OUTSIDE THE STATE OF CALIFORNIA**

**READ THE FOLLOWING INFORMATION BEFORE COMPLETING THE INITIAL APPLICATION**

- Do not write in the shaded areas.
- Type or print clearly in blue or black ink.
- Applications must be legible and contain an original signature.
- All fees must be paid by pre-printed personal check, company check, cashier's check, certified check, money order, or government purchase order.
- Fees cannot be refunded. By statute, all fees submitted are deemed earned upon receipt.
- All out-of-state addresses require a completed and notarized *Consent to Service of Process* (REA 3006).
- Answer all questions on this application and sign and date page three of this application prior to submission.
- If you have any questions, please write to the address listed below or call (916) 552-9000.
- Mail completed application, necessary fees and qualifying documentation to:

**OFFICE OF REAL ESTATE APPRAISERS**  
1102 Q Street, Suite 4100  
Sacramento, CA 95811

**FEES**

Application Review	\$150
Background Investigation	\$ 70
Total Initial Fees	\$220

Examination fees are paid directly to the examination test center at the time of the examination.

An application for Issuance of License (REA 3008) and license issuance fees are required after successfully passing the examination.

**INSTRUCTIONS PART A**

**1. APPLICATION LEVEL**--Mark the box for the level for which you wish to apply or upgrade. Mark one box only.

**Trainee License**--Requires an *Education Attachment* (REA 3002) and documentation supporting 150 hours of education not over 5 years old.

**Residential License**--Requires an *Education Attachment* (REA 3002) and documentation supporting 150 hours of education. In addition, an *Experience Log* (REA 3004) and *Experience Log Summary* (REA 3003), supporting 2000 hours & 12 months appraisal experience, are required.

**Certified Residential**--Requires an *Education Attachment* (REA 3002) and documentation supporting 200 hours of education. In addition, an *Experience Log* (REA 3004) and *Experience Log Summary* (REA 3003) supporting 2500 hours and 2 1/2 years appraisal experience, are required.

**Certified General**--Requires an *Education Attachment* (REA 3002) and documentation supporting 300 hours of education. In addition, an *Experience Log* (REA 3004) and *Experience Log Summary* (REA 3003), supporting 2 1/2 years and 3000 hours of experience, of which 1500 hours must be non-residential experience, are required.

**NOTE:** Education for all levels must include 15 hours on the Uniform Standards of Professional Appraisal Practice (USPAP).

**2. NAME**--Your legal name.

**3. SEX**--Mark the appropriate box.

**4. HEIGHT**--Your height in feet and inches. Example, 5'8"

**5. WEIGHT**--Your weight in pounds. Example 130 lbs.

**6. EYE COLOR**--Do not abbreviate.

**7. HAIR COLOR**--Do not abbreviate.

**8. BIRTHDATE**--Your date of birth (mm/dd/yy).

**9. DRIVER'S LICENSE NUMBER**--Your driver's license number, including the issuing state.

**10. SOCIAL SECURITY NUMBER**--Your social security number is mandatory. OREA cannot issue licenses without a social security number issued by the U. S. Social Security Administration (Business and Professions Code Section 11340).

**READ THE FOLLOWING INFORMATION BEFORE COMPLETING THE INITIAL APPLICATION**

**11. ADDITIONAL SOCIAL SECURITY NUMBERS--**All additional social security numbers issued for any reason.

**12. BUSINESS NAME AND ADDRESS OF RECORD--**The name of your business or employer name. Your physical business address of record is mandatory information. Do not list a P.O. Box, Rural Route or Star Route. If a physical address is not available, indicate the physical location (i.e., the nearest intersection and distance from it). If a business address is not available your physical residence address may be provided. Please Note: The information required is public record.

**13. MAILING ADDRESS--**Your mailing address, if it is different from your business address. The information required is public record.

**14. PHYSICAL HOME ADDRESS--**The physical location of your home address. Do not list a P.O. Box, Rural Route or Star Route. If a physical address is not available indicate the physical location (i.e., the nearest intersection and distance from it).

**15. BUSINESS TELEPHONE NUMBER--**Your business telephone number. The information required is public record.

**16. HOME TELEPHONE NUMBER--**Your home telephone number.

**17. COLOR PHOTO--**Two color 2" x 2" photos of passport quality. Your head and shoulders only, are required. Paste one on the space provided. Paperclip the other to page one of this application. Sign and date both photos in ink across the lower portion of the photo. The photos must have been taken within the last 60 days.

**QUESTION 18.**

**A.** Mark "yes" if you have previously submitted an application to OREA.

**B.** If you currently or have previously held a California Real Estate Appraisers license, mark "yes" and provide the license number in the space provided.

**C.** If you currently or have previously held a real estate appraisers license in another state mark "yes". Write the license number, expiration date and the state it was issued in on the space provided.

Applicants who submit a letter of license history, not more than 30 days old, which shows current license status in good standing in another state, and have not been found to be out of compliance with federal requirements, are not required to take an examination in California provided the level for which they are applying is equivalent to the license level noted in the letter of license history.



## APPLICATION FOR RECIPROCAL LICENSE

*Read All Directions Prior to Completing This Application*

### PART A

<b>1. License Level in Resident State</b> <input type="checkbox"/> Trainee License <input type="checkbox"/> Residential License <input type="checkbox"/> Certified Residential <input type="checkbox"/> Certified General <input type="checkbox"/> Other _____																																																											
<b>2. Level of License for which you are Applying</b> <input type="checkbox"/> Trainee License <input type="checkbox"/> Residential License <input type="checkbox"/> Certified Residential <input type="checkbox"/> Certified General																																																											
<b>3. State of Issuance of License</b>				<b>4. License Number</b>				<b>5. License Expiration Date</b>																																																			
<b>6. Name</b> Last _____ First _____ Middle _____																																																											
<b>7. Sex</b> <input type="checkbox"/> Male <input type="checkbox"/> Female			<b>8. Height</b>		<b>9. Weight</b>		<b>10. Eye Color</b>		<b>11. Hair Color</b>		<b>12. Birthdate</b>																																																
<b>13. Driver's License Number</b>				<b>14. Social Security Number</b>				<b>15. Additional Social Security Numbers</b>																																																			
<b>16. Business Name and Address of Record</b> (Do Not List a P.O. Box, Rural Route or Star Route) Name or Business _____ Number, Street and Suite Number _____ City _____ County _____ State _____ Zip Code _____																																																											
<b>17. Mailing Address</b> Number, Street and Suite Number _____ City _____ County _____ State _____ Zip Code _____																																																											
<b>18. Physical Home Address</b> (Do Not List a P.O. Box, Rural Route or Star Route) Number, Street and Suite Number _____ City _____ County _____ State _____ Zip Code _____																																																											
<b>19. Business Telephone Number</b> (    )    )						<b>20. Home Telephone Number</b> (    )    )																																																					
<b>21. Color Photo</b>  Submit two signed 2 x 2 color photos of passport quality  Place one here  Paperclip the other to the front of this document				<b>22. Please Answer the Following Questions</b>  A. Have you previously submitted an application to OREA? No <input type="checkbox"/> Yes <input type="checkbox"/>  B. Do you currently or have you previously held a California Real Estate Appraisers license? No <input type="checkbox"/> Yes <input type="checkbox"/> License Number: _____																																																							
<table border="1"><tr><td colspan="12">FOR OREA USE ONLY</td></tr><tr><td colspan="4">License Hist.: Y N</td><td colspan="4">F/L Y N N/A</td><td colspan="4" rowspan="4">Comments:  By: _____ Date: _____ <b>INITIAL REQ MET</b> <input type="checkbox"/></td></tr><tr><td colspan="4">Initial Appr. Y N</td><td colspan="4">Resolved Y N N/A</td></tr><tr><td colspan="4">BIO complete: Y N</td><td colspan="4">F/U Y N N/A</td></tr><tr><td colspan="4">Cons to Serv: Y N</td><td colspan="4">Resolved Y N N/A</td></tr></table>												FOR OREA USE ONLY												License Hist.: Y N				F/L Y N N/A				Comments:  By: _____ Date: _____ <b>INITIAL REQ MET</b> <input type="checkbox"/>				Initial Appr. Y N				Resolved Y N N/A				BIO complete: Y N				F/U Y N N/A				Cons to Serv: Y N				Resolved Y N N/A			
FOR OREA USE ONLY																																																											
License Hist.: Y N				F/L Y N N/A				Comments:  By: _____ Date: _____ <b>INITIAL REQ MET</b> <input type="checkbox"/>																																																			
Initial Appr. Y N				Resolved Y N N/A																																																							
BIO complete: Y N				F/U Y N N/A																																																							
Cons to Serv: Y N				Resolved Y N N/A																																																							

## APPLICANT BACKGROUND INFORMATION

### INSTRUCTIONS

- YOU MUST ANSWER EACH OF THE FOLLOWING QUESTIONS BY WRITING "YES" OR "NO", WHICHEVER IS TRUE, AFTER EACH QUESTION.
- ALL "YES" ANSWERS MUST BE EXPLAINED ON A SEPARATE SHEET OF PAPER WHICH YOU MUST ATTACH.
- FAILURE TO ANSWER ALL QUESTIONS OR FAILURE TO ANSWER ANY QUESTION TRUTHFULLY MAY RESULT IN THE DELAY OR DENIAL OF YOUR APPLICATION.
- PROVIDING FALSE INFORMATION MAY ALSO SUBJECT YOU TO DISCIPLINARY ACTION OR CRIMINAL PROSECUTION

1. Have you ever used or been known by any name other than, or in addition to, the name listed on the reverse side of this application? yes list all such other names.

Applicant's answer \_\_\_\_\_

2. Have you resided outside the State of California at any time during the past 5 years? If yes, list all addresses at which you resided outside of California during this period.

Applicant's answer \_\_\_\_\_

3. Have you ever been convicted in California or anywhere else of a criminal offense other than a minor traffic offense? If yes, please indicate all such offenses including the date and location of conviction. For purposes of this question, a minor traffic offense is one for which the maximum fine which could have been imposed is \$100 or less.

To expedite review of your application, please attach a copy of the police report and a certified copy of the court docket, complaint and judgement showing the final disposition (sentence) of the case.

**NOTE:** Termination of probation and dismissal of the matter pursuant to Penal Code Section 1203.4 does not relieve you of the requirement to disclose any conviction when applying for a license issued by the Office of Real Estate Appraisers.

Applicant's answer \_\_\_\_\_

4. Are you now or have you ever been placed on probation or parole on terms which restricted or limited your contact or dealing with all financial or real estate related activity or business or otherwise restricted your acting in a fiduciary capacity?

To expedite review of your application, please attach a certified copy of the court records, including the complaint, complete docket docket, judgement and sentence, and probation report and attach a copy of the police report(s) and/or investigating agency records.

Applicant's answer \_\_\_\_\_

5. Have you ever been prohibited from participating in the affairs of any insured depository institution pursuant to Section 19(a) of the Federal Deposit Insurance Act?

Applicant's answer \_\_\_\_\_

6. Do you presently have criminal charges pending before any court of law? If so, please specify the court in which the matter is pending, the case number and charges and submit a copy of the police report, and a certified copy of the complaint and docket.

Applicant's answer \_\_\_\_\_

7. Do you currently hold a professional or vocational license issued by any other governmental agency? If yes, please identify the license held, the license number and the issuing agency.

Applicant's answer \_\_\_\_\_

8. Have you ever been disciplined or had a penalty imposed by any other governmental agency with respect to your activities as a licensee of that agency? Attach a copy of the police report(s) and/or investigating agency records.

Applicant's answer \_\_\_\_\_

**READ THE FOLLOWING INFORMATION BEFORE COMPLETING THE INITIAL APPLICATION**

- Any license issued pursuant to this application shall terminate automatically if the Appraisal Subcommittee of the Federal Financial Institutions Examination Council finds either state not to be in compliance with Appraisal Subcommittee guidelines.

In the event this agreement is terminated by either state:

- \* Any license issued pursuant to this application shall be void as of its current expiration date and shall not be subject to renewal; and
- \* No new license shall be issued pursuant to this application subsequent to receipt of a 30 day notice of termination of the reciprocity agreement between California and the applicant's state of residence.
- Reciprocal licenses are not "renewable." However, if you renew your license in your home state you may apply for a new reciprocal license in California.
- In the event you subsequently become a resident of California after the issuance of a reciprocal license, you may apply for a California Real Estate Appraiser License by submitting an *Initial Application* (REA 3001), paying all required fees, and meeting all qualifying requirements in effect at the time of application.
- Do not write in the shaded areas.
- Type or print clearly in blue or black ink.
- Applications must be legible and contain an original signature.

- California applicants not currently licensed by the Office of Real Estate Appraisers are required to submit two completed fingerprint cards (BID 7).
- Submit a *Certificate of License History* or its equivalent, not more than 30 days old, from your resident state.
- Submit a completed and notarized *Consent to Service of Process* (REA 3006).
- All fees must be paid by pre-printed personal check, company check, cashier's check, certified check, money order or government purchase order.
- Fees cannot be refunded. By statute, all fees submitted are deemed earned upon receipt.
- Answer all questions on this form and sign and date on page three of this application prior to submittal.
- If you have any questions, please write to the address listed below or call (916) 263-0722.
- Mail completed application, necessary fees and qualifying documentation to:

**OFFICE OF REAL ESTATE APPRAISERS**  
1755 Creekside Oaks Drive, Suite 190  
Sacramento, CA 95833

**INSTRUCTIONS**

**FEES**

**Trainee or Residential License**

Application Review	\$150.00
Issuance (per year)	\$150.00
Child Support Review	\$ 10.00
Background Investigation	\$ 70.00
Federal Registry (per year)	\$ 25.00
Federal Registry Processing	\$ 25.00

**Certified Residential or Certified General License**

Application Review	\$150.00
Issuance (per year)	\$187.50
Child Support Review	\$ 10.00
Background Investigation	\$ 70.00
Federal Registry (per year)	\$ 25.00
Federal Registry Processing	\$ 25.00

**NOTE:** Issuance fees and Federal Registry fees are required for each year or partial year remaining on the term of your home state license.

- LICENSE LEVEL IN RESIDENT STATE**--Mark the box of the level for which you are currently licensed in your resident state. If your license title is different than listed, mark the blank box and provide the title of your license in the space provided.
- APPLICATION LEVEL**--Mark the box for the level for which you wish to apply. Mark one box only. You may not apply for a license level higher than the level currently held in your resident state.
- STATE OF ISSUANCE OF LICENSE**--Print the name of the state in which your current license was issued.
- LICENSE NUMBER**--Print the license number of your current license.
- LICENSE EXPIRATION DATE**--Print the license expiration date of your current license.
- NAME**--Your legal name.
- SEX**--Mark the appropriate box.
- HEIGHT**--Your height in feet and inches. Example: 5'8"
- WEIGHT**--Your weight in pounds. Example: 130 lbs.



**READ THE FOLLOWING INFORMATION BEFORE COMPLETING THE INITIAL APPLICATION**

**EYE COLOR**--Do not abbreviate.

**QUESTION 22**

**A.** Mark "yes" if you have previously submitted an application OREA.

**B.** If you currently or you have previously held a California Real Estate Appraisers license mark "yes" and provide the license number on the space provided.

**11. HAIR COLOR**--Do not abbreviate.

**12. BIRTHDATE**

**13. DRIVER'S LICENSE NUMBER**--Your driver's license number, including the issuing state.

**14. SOCIAL SECURITY NUMBER**--Your social security number is mandatory. OREA cannot issue licenses without a social security number issued by the U. S. Social Security Administration (Business and Professions Code Section 11340).

**15. ADDITIONAL SOCIAL SECURITY NUMBERS**--Any other social security numbers you have used for any reason.

**16. BUSINESS NAME AND ADDRESS OF RECORD**--The name of your business or employer name. The physical business address of record is mandatory information. Do not list a P.O. Box, Rural Route or Star Route. If a physical address is not available indicate the physical location (i.e., the nearest intersection and distance from it). If a business address is not available your physical residence address may be provided. Please Note: The information provided is public record.

**17. MAILING ADDRESS**--Your mailing address. Please Note: The information provided is public record.

**18. PHYSICAL HOME ADDRESS**--The physical location of your home address. Do not list a P.O. Box, Rural Route or Star Route. If a physical address is not available indicate the physical location (i.e., the nearest intersection and distance from it).

**19. BUSINESS TELEPHONE NUMBER**--Your business telephone number. The information provided is public record.

**20. HOME TELEPHONE NUMBER**--Your home telephone number.

**21. COLOR PHOTO**--Paste a color 2" X 2" photo of passport quality, of your head and shoulders only on the space provided. Paperclip the other photo to the front of this document. Sign and date the photos in ink across the lower portion of the photos. The photos must have been taken within the last 60 days.



OREA USE ONLY		Type Remit
Rec'd	DSS	<input type="checkbox"/> CC
App Rev	Overpay	<input type="checkbox"/> MO
IP	Misc	<input type="checkbox"/> PO

## APPRAISAL MANAGEMENT COMPANY (AMC) CONTROLLING PERSON APPLICATION

Read all directions prior to completing this form.

### PART I: Controlling Person Contact Information

#### 1. Controlling Person's Name

Last

First

MI

#### 2. Controlling Person's Title or Position

#### 3. Social Security Number

#### 4. Birth Date

#### 5. Name of Appraisal Management Company

#### 6. Business Address

Address

City

State

Zip Code

#### 7. Mailing Address

Address

City

State

Zip Code

#### 8. Physical Home Address

Address

City

State

Zip Code

#### 9. Business Telephone Number

#### 10. Home Telephone Number

#### 11. Email Address (Specify if Business or Home)

### Please Answer the Following Questions:

12. Do you currently or have you ever held a California Real Estate Appraisers License?

☐ Yes

☐ No

If Yes, please list your license number

License No

California Real Estate Appraisers License Number

13. Do you currently or have you ever held a real estate appraisers license in another State?

☐ Yes

☐ No

If Yes, please list your license number and the state in which you hold your license.

License No

State

Real Estate Appraisers License Number

If you are currently licensed in another state as a real estate appraiser, you will need to submit a **Certificate of License History** or its equivalent, not more than 30 days old, from the state in which you are licensed, as part of this application.

## PART II: CONTROLLING PERSON BACKGROUND INFORMATION

**1. FINGERPRINT BACKGROUND CHECK:** *\*\*Please Note: All controlling person applicants that are NOT currently licensed with the Office of Real Estate Appraisers (OREA) MUST complete the background application process by having their fingerprints taken. Please have your fingerprints taken using a Request for Live Scan Service form (BCII 8016) if you reside in the State of California. You MUST print out and use the Request for Live Scan Service form (BCII 8016) located on the OREA website. If you reside outside of the State of California, please submit two FD-258 fingerprint cards with your application.*

### 2. BACKGROUND REVIEW QUESTIONS

#### INSTRUCTIONS

- YOU MUST ANSWER EACH OF THE FOLLOWING QUESTIONS BY MARKING "YES" OR "NO", WHICHEVER IS TRUE, AFTER EACH QUESTION.
- ALL "YES" ANSWERS MUST BE EXPLAINED ON A SEPARATE SHEET OF PAPER WHICH YOU MUST ATTACH TO THIS APPLICATION FORM. EACH ADDITIONAL SHEET MUST BE SIGNED BY THE CONTROLLING PERSON APPLICANT.
- FAILURE TO DISCLOSE PERTINANT INFORMATION MAY RESULT IN THE DELAY OR DENIAL OF YOUR APPLICATION.
- PROVIDING FALSE INFORMATION MAY ALSO SUBJECT YOU TO DISCIPLINARY ACTION OR CRIMINAL PROSECUTION.

1. Have you ever used or been known by any name other than, or in addition to, the name listed on this application? If yes, list all such other names.  
☐ No ☐ Yes, explain: \_\_\_\_\_
2. Have you ever been entered a plea of guilty or no contest to, or been convicted in California or anywhere else of a criminal offense other than a minor traffic offense? If yes, please indicate all such offenses including the date and location of each offense. For purposes of this question, a minor traffic offense is one for which the maximum fine which could have been imposed is \$100 or less. To expedite review of your application, please attach a copy of the police report and a certified copy of the court docket, complaint and judgment showing the final disposition (sentence) of the case. **NOTE: Termination of probation and dismissal of the matter pursuant to Penal Code section 1203.4 DOES NOT relieve you of the requirement to disclose any conviction for purposes of this application.**  
☐ No ☐ Yes, explain: \_\_\_\_\_
3. Are you or have you even been placed on probation or parole on terms which restricted or limited your contact or dealings with any financial or real estate-related activity or business or otherwise restricted your acting in a fiduciary capacity? If yes, attach a certified copy of the court records, including the complaint, complete docket, judgment and sentence, and probation report and attach a copy of the police report(s) and/or investigating agency records.  
☐ No ☐ Yes, explain: \_\_\_\_\_
4. Do you presently have criminal charges pending before any court of law? If yes, please specify the court in which the matter is pending, the case number and charges and submit a copy of the police report and a certified copy of the complaint and docket.  
☐ No ☐ Yes, explain: \_\_\_\_\_
5. Do you currently hold a professional or vocational license issued by any other governmental agency? If yes, please identify the license held, the license number and the issuing agency.  
☐ No ☐ Yes, explain: \_\_\_\_\_
6. Have you ever had a license or certificate to act as an appraiser or to engage in activities related to the transfer of real property denied, suspended, restricted or revoked in this state or any other state? If yes, attach a copy of the final agency action and related investigator agency records.  
☐ No ☐ Yes, explain: \_\_\_\_\_
7. Have you ever been disciplined or have you received any order or judgment by a court or governmental agency, including OREA, which order or judgment temporarily or permanently restrained or enjoined you from engaging in specific business conduct or licensed activity? If yes, attach a certified copy of any court records, including the complaint, complete docket, judgment and sentence and/or any final order and related investigator file.  
☐ No ☐ Yes, explain: \_\_\_\_\_

### PART III: APPLICANT DECLARATION

I, \_\_\_\_\_ (name), certify under penalty of perjury in accordance with California law that I am a Controlling Person (as defined herein) and duly authorized as such and understand and agree, individually and on behalf of \_\_\_\_\_ (name of AMC), to abide by all federal and California laws applicable to appraisal management companies receiving and maintaining a Certificate of Registration under California law. I declare under penalty of perjury in accordance with California law that I am 18 years of age or older and that the foregoing information and information provided on all attachments is true and correct and that I have answered each question fully and truthfully without any purpose of evasion or mental reservation. I understand that providing false information is grounds for denial or revocation of any certificate of registration and may subject me to disciplinary action and/or criminal prosecution and punishment by imprisonment in state prison for 2, 3, or 4 years pursuant to Penal Code section 126. I understand that any certification of registration issued in conjunction with this application entitles the applicant to act only for the appraisal management company so registered and not in an individual capacity.

I understand and certify that valid service of process on the appraisal management company \_\_\_\_\_ (name of AMC) by OREA also constitutes valid service of process on me as a Controlling Person for \_\_\_\_\_ (name of AMC), as certified by the Designated Officer for \_\_\_\_\_ (name of AMC) in the *Appraisal Management Company Certificate of Registration Application Form REA 5001* submitted by \_\_\_\_\_ (name of AMC), or by a subsequent Designated Officer identified by \_\_\_\_\_ (name of AMC) in an *Appraisal Management Company Change Notification and Miscellaneous Requests Form REA 5011*.

I understand that if I fail to qualify as a Controlling Person for any reason or withdraw this application, the Office of Real Estate Appraisers cannot refund the fees remitted with this application.

Executed this \_\_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_ (city or county)  
\_\_\_\_\_, (state).

Signature \_\_\_\_\_

Name (please print) \_\_\_\_\_

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_ before me \_\_\_\_\_ personally appeared \_\_\_\_\_ personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to this instrument and acknowledged that he/she executed it.

\_\_\_\_\_  
Signature of Notary Public

**MUST BE SIGNED AND CERTIFIED BY A NOTARY PUBLIC IF EXECUTED OUTSIDE THE STATE OF CALIFORNIA**

## PART IV. READ THE FOLLOWING INFORMATION PRIOR TO COMPLETING THIS FORM

### A. GENERAL INFORMATION

- Complete all sections of Parts I, II and III above
- Do not write in the shaded areas.
- Type or print clearly in blue or black ink
- Applications must be submitted with original signatures. Applications with electronic or faxed signatures will not be accepted.
- **A separate application must be submitted for each Controlling Person listed on the Appraisal Management Company Certificate of Registration Application form REA 5001.**
- Mail completed application, necessary fees and qualifying documentation to:

#### OFFICE OF REAL ESTATE APPRAISERS

1102 Q Street, Suite 4100  
Sacramento, CA 95811

*If you have any questions, please write to the address listed above or call (916) 552-2000*

### B. APPLICATION FEES

Applicants currently not licensed or registered with OREA:

Background Investigation Fee \$70  
Child Support Review Fee \$10

Total Fees \$80

- Applicants currently licensed or registered with OREA will not be charged the above-referenced fee
- All application fees must be paid by pre-printed personal check, company check, cashier's check, certified check, money order, or government purchase order.
- All application fees are non-refundable.
- Once OREA approves an AMC applicant and each associated Controlling Person Application, an Issuance Fee will be due to OREA prior to issuance of the final Certificate of Registration.
- Appraisal management companies MUST notify the OREA within 10 business days of any change to contact information for the Designated Officer or any Controlling Person by submitting an *Appraisal Management Company Change Notification and Miscellaneous Requests* Form REA 5011. A *Controlling Persons Application* Form REA 5002 must accompany the submittal of Form REA 5011 unless:
  - (a) OREA has an approved Form REA 5002 on file for the newly designated Controlling Person; or
  - (b) The new designee holds an active real estate appraisal license with the OREA.

### C. DEFINITIONS

**"Appraisal Management Company"** means:

1. Any person or entity that satisfies all of the following conditions:
  - (A) Maintains an approved list or lists, containing 11 or more independent contractor appraisers licensed or certified pursuant to this part, or employs 11 or more appraisers licensed or certified pursuant to this part.
  - (B) Receives requests for appraisals from one or more clients.
  - (C) For a fee paid by one or more of its clients, delegates appraisal assignments for completion by its independent contractor or employee appraisers.
2. "Appraisal management company" does not include any of the following, when that person or entity directly contracts with an independent appraiser:
  - (A) Any bank, credit union, trust company, savings and loan association, or industrial loan company doing business under the authority of, or in accordance with, a license, certificate, or charter issued by the United States or any state, district, territory, or commonwealth of the United States that is authorized to transact business in this state.
  - (B) Any finance lender or finance broker licensed pursuant to Division 9 (commencing with Section 22000) of the Financial Code, when acting under the authority of that license.
  - (C) Any residential mortgage lender or residential mortgage servicer licensed pursuant to Division 20 (commencing with Section 50000) of the Financial Code, when acting under the authority of that license.
  - (D) Any real estate broker licensed pursuant to Part 1 (commencing with Section 10000) of Division 4 of the Business and Professions Code, when acting under the authority of that license.
3. "Appraisal Management Company" does not include any person licensed to practice law in this state who is working with or on behalf of a client of that person in connection with one or more appraisals for that client.

**"Controlling Person"** means one or more of the following:

- (1) An officer or director of an appraisal management company, or an individual who holds a 10 percent or greater ownership interest in an appraisal management company; or
- (2) An individual employed, appointed, or authorized by an appraisal management company that has the authority to enter into a contractual relationship with clients for the performance of appraisal services and that has the authority to enter into agreements with independent appraisers for the completion of appraisals; or
- (3) An individual who possesses the power to direct or cause the direction of the management or policies of an appraisal management company.

**"Designated Officer"** means:

A Controlling Person authorized by the governing structure of the appraisal management company to act on behalf of the company for purposes of application for, and compliance with, a Certificate of Registration to operate as an appraisal management company pursuant to California law. The Designated Officer shall be responsible for the supervision and control of the activities conducted on behalf of the appraisal management company by its officers and employees as necessary to secure full compliance with the provisions of SB 237 (Stats. 2009, ch. 173), including contract services provided to the appraisal management company for the performance of appraisal activities for which a California Real Estate Appraisal license is required.

## PART V: Instructions

### A. INSTRUCTIONS PART I: *Controlling Person Contact Information*

1. **CONTROLLING PERSON'S NAME** - List your name. You **must** be listed as a Controlling Person on the *Appraisal Management Company Certificate of Registration Application Form REA 5001* or listed as a Controlling Person on an *Appraisal Management Company Change Notification and Miscellaneous Request Form REA 5011*.

2. **TITLE OR POSITION** - List your title or position.

3. **SOCIAL SECURITY NUMBER** - List your social security number.

4. **BIRTH DATE** - List your date of birth.

5. **APPRAISAL MANAGEMENT COMPANY** - List the name of the appraisal management company for which you are named as a Controlling Person.

6. **BUSINESS ADDRESS** - Your physical business address of record is mandatory information. Do not list a P.O. Box, Rural Route or Star Route. If a physical address is not available, indicate the physical location (i.e., the nearest intersection and distance from it).

7. **MAILING ADDRESS** - List your mailing address if it is different from your business address.

8. **PHYSICAL HOME ADDRESS** - List the physical location of your home address. Do not list a P.O. Box, Rural Route or Star Route. If a physical address is not available, indicate the physical location (i.e., the nearest intersection from it).

9. **BUSINESS TELEPHONE NUMBER** - List your business phone number.

10. **HOME TELEPHONE NUMBER** - List your home phone number.

11. **EMAIL ADDRESS** - List your email address and specify whether it is your business or home email.

12. & 13. List the **state** in which you hold a real estate appraisers license and your **license number**, if applicable. Submit a Certificate of License History or its equivalent, not more than 30 days old, if you hold a real estate appraisers license in another state.

### B. INSTRUCTIONS PART II: *Controlling Person Background Information*

1. **FINGERPRINT BACKGROUND CHECK** - Applicants not currently licensed or registered with the OREA **must** submit fingerprints in order to complete the background check portion of this application. Fingerprint background checks are submitted to the Department of Justice via a Request for Live Scan Service form or print cards. If you live in the State of California you must submit your fingerprints using the Request for Live Scan Service Form located on our website at [www.orea.ca.gov](http://www.orea.ca.gov). You must print out this form located on the OREA website and visit a Live Scan fingerprinting location to have your fingerprints rolled. Keep a copy of this form for your records and submit a copy along with this application to the OREA.

If you reside outside of California, you must submit your fingerprints on two FD-258 fingerprint cards and submit these cards to OREA with your application.

*\*Please note, the Department of Justice no longer accepts fingerprint card submissions on Bid-7 cards from OREA applicants.*

2. **BACKGROUND REVIEW QUESTIONS** - Answer all questions, 1-7 as instructed and completely.

### C. INSTRUCTIONS PART III: *Applicant Declaration*

1. **APPLICANT DECLARATION** - Read, sign and date the declaration. If executed outside of the State of California, this declaration must be signed before and certified by a notary public.

**Privacy Notice** - Any individual submitting personal information within the meaning of the Information Practices Act of 1977, as amended (California Civil Code, Section 1798 *et seq.*) shall be entitled to the rights provided under section 1798.17 of that Act and the California Code of Regulations, Title 10, section 3761 regarding access to inspect OREA records containing such personal information about himself or herself.

Personal information provided within this application may not be used for any purpose other than to determine an applicant's identity and eligibility as a Controlling Person and the eligibility of the relevant appraisal management company for a certificate of registration. Disclosure of personal information on an applicant to others for any other purpose without the individual's consent, or as otherwise provided in California law, is restricted by law.

**NOTE:** The following is considered public information and will be disclosed upon request: name and fictitious name, if any, of the appraisal management company; business address (or other physical address) and mailing address of record for the appraisal management company and the applicant (if different than the company address); and business telephone and/or facsimile number of record for the appraisal management company and the applicant (if different from the company address.)



Rec'd  
App Rev  
RP

OREA USE ONLY

Overpay  
Misc

Type Remit

☐ CC  
☐ MO  
☐ NO

## APPRAISAL MANAGEMENT COMPANY RENEWAL APPLICATION

*Read All Directions in Parts IV and V Prior to Completing this Application. Refer to Part IV Section C for Definitions of Appraisal Management Company, Controlling Person, and Designated Officer.*

### PART I: Applicant Information

#### A. Appraisal Management Company (AMC)

1. Name

2. Business Street Address (P.O. Boxes not allowed)

Address

City

State

Zip Code

3. Business Telephone Number

4. Business Fax Number

#### B. Designated Officer

*(Note: The Designated Officer MUST be included on the AMC list of qualified Controlling Persons (see Parts II, IV and V below.)*

1. Name

Last

First

MI

2. Title

3. Business Telephone Number

4. Business Fax Number

5. Mailing Address

Address

City

State

Zip Code

6. Physical Home Address

Address

City

State

Zip Code

7. Home/Cell Telephone Number

8. Business Email Address

#### C. Type of Entity

1. Legal Structure. Check the box that applies to the business entity type of the applicant.

Domestic Corporation

Foreign Corporation

Partnership

Sole Proprietor

Domestic LLC

Foreign LLC

Limited Partnership

Other \*

If "Other" describe:

2. Formation Documents. Submit Articles of Incorporation or equivalent formation documents verifying the legal formation and operation of the AMC if there has been any change in the legal structure since the issuance of current Certificate of Registration. Attach to this application.

**D. Agent for Service of Process:**

*This section is to be completed if the Applicant is not domiciled in California. Please provide the name and contact information for the person or entity authorized as the Applicant's agent for service of process within California. This agent for service of process must complete the declaration below and have this document notarized prior to submittal.*

1. Name

2. Title

3. Address (P.O. Boxes not allowed)

4. Business Telephone Number

5. Business Fax Number

I, \_\_\_\_\_ (name), am authorized to act as Agent for service of process in the State of California on behalf of \_\_\_\_\_ (name of AMC), an entity organized and existing under the laws of the State of \_\_\_\_\_ (current resident state), for purposes of this application before the Director of the Office of Real Estate Appraisers of the State of California to obtain an AMC Certificate of Registration and, thereafter, to operate as a valid AMC in accordance with California law and all of the rights and obligations associated therewith, and I do hereby certify:

The complete address within California whereby I, on behalf of \_\_\_\_\_ (name of AMC) may be served with process by the Director of the Office of the Real Estate Appraisers or his/her designee is as follows:

Address

City

State

Zip Code

IN WITNESS WHEREOF, I, \_\_\_\_\_ (Agent Name for service of process) have subscribed my name hereto this \_\_\_\_\_ (day) day of \_\_\_\_\_ (month), \_\_\_\_\_ (year) at \_\_\_\_\_ (city), \_\_\_\_\_ (state).

Signature \_\_\_\_\_

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_ before me \_\_\_\_\_ personally appeared \_\_\_\_\_ personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to this instrument and acknowledged that he/she executed it.

Signature of Notary Public

**MUST BE SIGNED AND CERTIFIED BY A NOTARY PUBLIC IF EXECUTED OUTSIDE THE STATE OF CALIFORNIA**



## PART II: Controlling Person(s) Information

1. List each name of all "Controlling Persons" of the AMC Including the Designated Officer. Refer to Part IV Section C for a definition of "Controlling Person".

- |    |     |
|----|-----|
| 1. | 2.  |
| 3. | 4.  |
| 5. | 6.  |
| 7. | 8.  |
| 9. | 10. |

2. A separate "Appraisal Management Company (AMC) Controlling Person Application" (REA 5002 Rev 07/01/10), form must be included for each of the above listed Controlling Persons and submitted with this AMC application (REA 5001 Rev 07/01/10).

## PART III: Application Declaration

I, \_\_\_\_\_ (name), certify under penalty of perjury in accordance with California law, that I am the Designated Officer and duly authorized as such and understand and agree, individually and on behalf of \_\_\_\_\_ (name of AMC), to abide by all federal and California laws applicable to appraisal management companies receiving and maintaining a Certificate of Registration under California law. In addition, I certify that \_\_\_\_\_ (name of AMC) is legally formed pursuant to the applicable state law and, further, that \_\_\_\_\_ (name of AMC) shall comply with all California laws as necessary in order to validly operate in California. I declare under penalty of perjury in accordance with California law that I am 18 years of age or older and that the foregoing information and information provided on all attachments is true and correct and that I have answered each question fully and truthfully and without any purpose of evasion or mental reservation. I understand that providing false information is grounds for denial or revocation of any certificate of registration and may subject me to disciplinary action and/or criminal prosecution and punishment by imprisonment in state prison for 2, 3 or 4 years pursuant to Penal Code section 126.

I also certify, under penalty of perjury in accordance with California law, that if a certificate of registration is issued pursuant to this application, \_\_\_\_\_ (name of AMC) will, in accordance with Business and Professions Code section 11345.3, include in all of its contracts with clients for appraisal services in California, provision of each of the following as standard business practices, as and where applicable:

- a. Ensuring that all independent contractor or employee appraisers that perform appraisal services for this company in California will possess a California real estate appraiser license in good standing;
- b. Reviewing the work of all independent contractor or employee appraisers to ensure that appraisal services are performed in accordance with the Uniform Standards of Professional Appraisal Practice (USPAP); and
- c. Maintaining, at a minimum, each of the following records for each service request:
  1. The date of receipt of the request;
  2. The name of the person from whom the request was received;
  3. The name of the client for whom the request was made, if different from the name of the person from whom the request was received;
  4. The appraiser or appraiser(s) assigned to perform the contracted service; and
  5. The date of delivery of the appraisal product to the client.

continued on page 4

I also certify, under penalty of perjury in accordance with California law, as to the following regarding service of process on \_\_\_\_\_ (name of AMC).

- a. That service of process on \_\_\_\_\_ (name of AMC) shall be deemed service of process on each and every Controlling Person individually (as identified by Applicant herein and/or as updated by *Appraisal Management Company Change Notification and Miscellaneous Requests* Form REA 5011 (New 7/01/10), as consistent with the duties and obligations of a Controlling Person within \_\_\_\_\_ (name of AMC).
- b. That the Applicant hereby irrevocably consents that if, in any action commenced against it by the Director of the Office of Real Estate Appraisers or his designee, service of process upon it cannot be made in California after the exercise of due diligence, a valid service may thereupon be made upon it by delivering the process to the Director of the Office of Real Estate Appraisers of the State of California.
- c. That, following such service of process pursuant to the irrevocable consent authorized herein, the Director of the Office of Real Estate Appraisers of the State of California may mail a copy of any such process to the \_\_\_\_\_ (name of AMC), at the following address:

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Executed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ (city or county) \_\_\_\_\_ (state).

Signature \_\_\_\_\_

Name (please print) \_\_\_\_\_

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_  
On this \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_ before me \_\_\_\_\_ personally appeared \_\_\_\_\_ personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to this instrument and acknowledged that he/she executed it \_\_\_\_\_  
Signature of Notary Public \_\_\_\_\_

**MUST BE SIGNED AND CERTIFIED BY A NOTARY PUBLIC IF EXECUTED OUTSIDE THE STATE OF CALIFORNIA**  
REA 5011.2 (New 09/01/10) page 4 of 6

## PART IV. READ THE FOLLOWING INFORMATION PRIOR TO COMPLETING THIS FORM

### A. GENERAL INFORMATION

- Complete all sections of Parts I, II and III above.
- Do not write in the shaded areas.
- Type or print clearly in blue or black ink.
- The Designated Officer must sign Part III after AMC completion of Parts I and II. Applications must be submitted with original signatures. Applications with electronic or faxed signatures will not be accepted.
- Mail completed application, necessary fees and qualifying documentation to:

#### OFFICE OF REAL ESTATE APPRAISERS

1102 O Street, Suite 4100

Sacramento, CA 95811

*If you have any questions, please write to the address listed above or call (916) 552-9000*

### B. RENEWAL APPLICATION FEE

AMC Application Review Fee	\$150
----------------------------	-------

- All application fees must be paid by pre-printed personal check, company check, cashier's check, certified check, money order, or government purchase order.
- All application fees are non-refundable.
- This \$150 AMC Application fee is separate from the \$80 fee charged for each "Controlling Person" application (REA 5002), which is intended to offset the cost of conducting a background investigation on the individual applicant.
- Once OREA approves an AMC applicant and each associated Controlling Person Application, an Issuance Fee will be due to OREA prior to issuance of the final Certificate of Registration.
- Appraisal management companies **MUST** notify the OREA within 10 business days of any change to contact information for the Designated Officer or any Controlling Person by submitting an *Appraisal Management Company Change Notification and Miscellaneous Requests* Form REA 5011 (New 09/01/10). A *Controlling Person's Application* Form REA 5002 (Rev 09/01/10) must accompany the submittal of Form REA 5011 unless:
  - (a) OREA has an approved Form REA 5002 on file for the newly designated Controlling Person; or
  - (b) The new designee holds an active real estate appraisal license with the OREA.

### C. DEFINITIONS

**"Appraisal Management Company"** means:

1. Any person or entity that satisfies all of the following conditions:
  - (A) Maintains an approved list or lists, containing 11 or more independent contractor appraisers licensed or certified pursuant to this part, or employs 11 or more appraisers licensed or certified pursuant to this part.
  - (B) Receives requests for appraisals from one or more clients.
  - (C) For a fee paid by one or more of its clients, delegates appraisal assignments for completion by its independent contractor or employee appraisers.

2. "Appraisal management company" **does not** include any of the following, when that person or entity directly contracts with an independent appraiser:

- (A) Any bank, credit union, trust company, savings and loan association, or industrial loan company doing business under the authority of, or in accordance with, a license, certificate, or charter issued by the United States or any state, district, territory, or commonwealth of the United States that is authorized to transact business in this state.
- (B) Any finance lender or finance broker licensed pursuant to Division 9 (commencing with Section 22000) of the Financial Code, when acting under the authority of that license.
- (C) Any residential mortgage lender or residential mortgage servicer licensed pursuant to Division 20 (commencing with Section 50000) of the Financial Code, when acting under the authority of that license.
- (D) Any real estate broker licensed pursuant to Part 1 (commencing with Section 10000) of Division 4 of the Business and Professions Code, when acting under the authority of that license.

3. "Appraisal Management Company" does not include any person licensed to practice law in this state who is working with or on behalf of a client of that person in connection with one or more appraisals for that client.

**"Controlling Person"** means one or more of the following:

- (1) An officer or director of an appraisal management company, or an individual who holds a 10 percent or greater ownership interest in an appraisal management company; or
- (2) An individual employed, appointed, or authorized by an appraisal management company that has the authority to enter into a contractual relationship with clients for the performance of appraisal services and that has the authority to enter into agreements with independent appraisers for the completion of appraisals; or
- (3) An individual who possesses the power to direct or cause the direction of the management or policies of an appraisal management company.

**"Designated Officer"** means:

A Controlling Person authorized by the governing structure of the appraisal management company to act on behalf of the company for purposes of application for and compliance with a Certificate of Registration to operate as an appraisal management company pursuant to California law. The Designated Officer shall be responsible for the supervision and control of the activities conducted on behalf of the appraisal management company by its officers and employees as necessary to secure full compliance with the provisions of SB 237 (Stats. 2000, ch. 173), including contract services provided to the appraisal management company for the performance of appraisal activities for which a California Real Estate Appraisal license is required.

## **PART V: Instructions**

### **A. INSTRUCTIONS PART I: *Applicant Information***

#### **INSTRUCTIONS PART I. A.: *AMC***

1. **NAME OF AMC** – List the name of the AMC for which you are submitting this application for certificate of registration.
2. **BUSINESS STREET ADDRESS** – List the business address of the AMC for which you are submitting this application for certificate of registration. Do **not** list a P.O. Box, Rural Route or Star Route. List the physical business address. If a physical address is not available, indicate the physical location (i.e., the nearest intersection and distance from it).
3. **BUSINESS TELEPHONE NUMBER** – List the business telephone number of the AMC for which you are submitting this application for certificate of registration.
4. **BUSINESS FAX NUMBER** – List the business fax number of the AMC for which you are submitting this application for certificate of registration.

#### **INSTRUCTIONS PART I. B.: *Designated Officer***

1. **NAME OF DESIGNATED OFFICER** – List the name of the company's Designated Officer. The Designated Officer must also be a listed Controlling Person and submit an *Appraisal Management Company (AMC) Controlling Person Application* form REA 5002 with this application.
2. **TITLE OF DESIGNATED OFFICER** – List the official title of the company's Designated Officer (e.g., President, Director, etc.) held within the company.
3. **BUSINESS TELEPHONE NUMBER OF DESIGNATED OFFICER** – List the business phone number for the Designated Officer of the company.
4. **BUSINESS FAX NUMBER OF DESIGNATED OFFICER** – List the business fax number for the Designated Officer of the company.
5. **MAILING ADDRESS OF DESIGNATED OFFICER** – List the mailing address for the Designated Officer if it is different from the business address.
6. **PHYSICAL HOME ADDRESS OF DESIGNATED OFFICER** – List the physical location of the Designated Officer's home address. Do not list a P.O. Box, Rural Route or Star Route. If a physical address is not available, indicate the physical location (i.e., the nearest intersection from it).
7. **HOME/CELL PHONE NUMBER OF DESIGNATED OFFICER** – List the main contact numbers for the Designated Officer including home and cellular phone number.
8. **BUSINESS EMAIL ADDRESS OF DESIGNATED OFFICER** – List the business email address for the Designated Officer of the company.

#### **INSTRUCTIONS PART I. C.: *Type of Entity***

1. **LEGAL STRUCTURE** – Check the box that describes the business entity type of the AMC. If the type is not listed, please provide a description.
2. **FORMATION DOCUMENTS** – Provide copies of the documents authorizing the valid formation of Applicant under the laws of the state in which it is organized (i.e., Articles of Incorporation, D.B.A., Business License, etc.)

#### **INSTRUCTIONS PART I. D.: *Agent for Service of Process***

1. **AGENT FOR SERVICE OF PROCESS** – This section is to be completed by an individual or entity within California that is designated to accept service of process on behalf of an Applicant that is domiciled outside of California. If an entity is designated as agent for service of process, Applicant must provide documentation verifying that this entity qualifies and is in compliance with California law governing service of process on foreign entities.

### **B. INSTRUCTIONS PART II: *Controlling Person(s) Information***

1. **NAMES OF CONTROLLING PERSON(S)** – List the full names of each "Controlling Person" of the AMC for which you are submitting this application for certificate of registration including the Designated Officer. Please refer to Part IV Section C for a definition of "Controlling Person".
2. **CONTROLLING PERSON APPLICATION (REA 5002)** – Attach a completed *Appraisal Management Company (AMC) Controlling Person Application* form REA 5002 for each individual listed as a Controlling Person (including the Designated Officer) that has not previously been approved as a Controlling Person by CREA.

### **C. INSTRUCTIONS PART III: *Application Declaration***

1. **APPLICATION DECLARATION** – The Designated Officer of the AMC shall read, sign and date the Application Declaration. If executed outside of the State of California, this declaration must be signed before and certified by a notary public. This form must be signed by the named "Designated Officer" listed in Part I section B of the application.

**Privacy Notice** – Any individual submitting personal information within the meaning of the Information Practices Act of 1977, as amended (California Civil Code, Section 1798 *et seq.*) shall be entitled to the rights provided under section 1798.17 of that Act and the California Code of Regulations, Title 10, section 3761 regarding access to inspect ORI/CA records containing such personal information about himself or herself. Personal information provided within this application may not be used for any purpose other than to determine an individual's identity and eligibility as a Controlling Person and the eligibility of the relevant appraisal management company for a certificate of registration. Disclosure of personal information on an application to others for any other purpose without the individual's consent, or as otherwise provided in California law, is restricted by law.

**NOTE:** The following is considered public information and will be disclosed upon request: name and fictitious name, if any, of the appraisal management company; business address (or other physical address) and mailing address of record for the appraisal management company; business telephone and/or facsimile number of record for the appraisal management company; and name and business address of each Controlling Person (as defined herein).



State of California  
OFFICE OF REAL ESTATE APPRAISERS

mis fees

OREA USE ONLY

Type Remit

- ☐ CC  
☐ MO  
☐ PO

**APPRAISAL MANAGEMENT COMPANY  
CHANGE NOTIFICATION AND MISCELLANEOUS REQUESTS**

*Read all directions prior to completing this form.*

*Please note that all changes requested on this form must be approved and certified by the Designated Officer of the AMC.  
The Designated Officer (or new Designated Officer) must sign this request form in  
PART III: Change and Request Declaration (top of page 5)*

**Part I: AMC Information** (Information presently on file with the OREA)

1. Name of AMC

2. AMC Certificate Number

3. Business Street Address (P.O. Boxes not allowed)

Address

City

State

Zip Code

4. Business Telephone Number

5. Business Fax Number

**Part II: Information to Be Changed**

Type of Change

☐ AMC

☐ Controlling Person

☐ Designated Officer

☐ \$50

☐ Issue Duplicate Certificate \$50

**A. AMC Changes**

**1. Changes to AMC Information.**

▼ Check boxes to indicate fields that are being changed.

☐ 1. Name

☐ 2. Business Street Address (P.O. Boxes not allowed)

Address

City

State

Zip Code

☐ 3. Business Telephone Number

☐ 4. Business Fax Number

☐ 5. Legal Structure

Domestic Corporation

Foreign LLC

Domestic LLC

Partnership

Foreign Corporation

Limited Partnership

☐ Sole Proprietor

☐ Other

If "Other" describe:



**Formation Documents.** Submit Articles of Incorporation or equivalent formation documents verifying the legal formation and operation of the AMC. Attach to this application.

## 2. Change for Agent for Service of Process

*This section is to be completed if the AMC is not domiciled in California. Please provide the name and contact information for the person or entity authorized as the AMC agent for service of process within California. This agent for service of process must complete the declaration below and have this document notarized prior to submittal.*

### Type of Change

New Agent for Service of Process

New Information for Existing Agent for Service of Process

#### 1. Name

Last

First

MI

#### 2. Title

#### 3. Address (P.O. Boxes not allowed)

Address

City

State

Zip Code

#### 4. Business Telephone Number

#### 5. Business Fax Number

I \_\_\_\_\_ (name), am authorized to act as Agent for service of process in the State of California on behalf of \_\_\_\_\_ (name of AMC), an entity organized and existing under the laws of the State of \_\_\_\_\_ (current resident state), for purposes of \_\_\_\_\_'s (name of AMC) operation as a valid AMC in accordance with California law under Certificate of Registration No. \_\_\_\_\_ (AMC Certificate Number), including all rights and obligations associated therewith, and I do hereby certify:

The complete address within California whereby I, on behalf of \_\_\_\_\_ (name of AMC) may be served with process by the Director of the Office of the Real Estate Appraisers or his/her designee is as follows:

Address

City

State

Zip Code

IN WITNESS WHEREOF, I, \_\_\_\_\_ (Agent Name for service of process) have subscribed my name hereto this \_\_\_\_\_ (day) day of \_\_\_\_\_ (month), \_\_\_\_\_ (year) at \_\_\_\_\_ (city), \_\_\_\_\_ (state).

Signature \_\_\_\_\_

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_  
On this \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_ before me \_\_\_\_\_ personally appeared \_\_\_\_\_ personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to this instrument and acknowledged that he/she executed it.

Signature of Notary Public \_\_\_\_\_

**MUST BE SIGNED AND CERTIFIED BY A NOTARY PUBLIC IF EXECUTED OUTSIDE THE STATE OF CALIFORNIA**

## B. Controlling Person(s) Changes

### 1. Addition and Removal of Controlling Person(s)

List the name of each "Controlling Person" of the AMC that is being added or removed for the AMC.

*Note: A separate "Appraisal Management Company (AMC) Controlling Person Application" (REA 5002 Rev 09/01/10) form and fees must be included for each Controlling Person that is being added unless OREA has an approved Form REA 5002 on file for the newly designated Controlling Person.*

Add Remove 1.

Add Remove 2.

Add Remove 3.

Add Remove 4.

Add Remove 5.

Add Remove 6.

Add Remove 7.

Add Remove 8.

Add Remove 9.

Add Remove 10.

### 2. Information Change for an Existing Controlling Person

▼ Check boxes to indicate fields that are being changed

☐ 1. Controlling Person's Name

First

Last

MI

☐ 2. Controlling Person's Title or Position

☐ 3. Mailing Address

Address

State

Zip Code

City

☐ 4. Physical Home Address

Address

State

Zip Code

City

☐ 5. Business Telephone Number

☐ 6. Home Telephone Number

☐ 7. Email Address (Specify if Business or Home)

### C. Change of Designated Officer

List the name of the new Designated Officer

Note: A separate "Appraisal Management Company (AMC) Controlling Person Application" (REA 5002 Rev 09/01/10) form and fees must be included for the Designated Officer to be added unless OREA has an approved Form REA 5002 on file for the new Designated Officer.

#### 1. New Designated Officer's Name

Last

First

#### 2. New Designated Officer's Social Security Number

Do you currently or have you ever held a California Real Estate Appraisers License?

☐ Yes ☐ No

License No.

I, \_\_\_\_\_ (name) certify under penalty of perjury in accordance with California law that I am the Designated Officer and duly authorized as such and understand and agree individually and on behalf of \_\_\_\_\_ (name of AMC), to abide by all federal and California law applicable to appraisal management companies receiving and maintaining a Certificate of Registration under California law. In addition, I certify that \_\_\_\_\_ (name of AMC) is legally formed pursuant to the applicable state law and, further, that \_\_\_\_\_ (name of AMC) shall comply with all California laws as necessary in order to validly operate in California. I declare under penalty of perjury in accordance with California law that I am 18 years of age or older and that the foregoing information and information provided on all attachments is true and correct and that I have answered each question fully and truthfully and without any purpose of evasion or mental reservation. I understand that providing false information is grounds for denial or revocation of any certificate of registration and may subject me to disciplinary action and/or criminal prosecution and punishment by imprisonment in state prison for 2, 3 or 4 years pursuant to Penal Code section 126. I also certify under penalty of perjury in accordance with California law that \_\_\_\_\_ (name of AMC) will in accordance with Business and Professions Code section 11345.3, include in all of its contracts with clients for appraisal services in California, provision of each of the following as standard business practices, as and where applicable:

- Ensuring that all independent contractor or employee appraisers that perform appraisal services for this company in California will possess a California real estate appraiser license in good standing;
- Reviewing the work of all independent contractor or employee appraisers to ensure that appraisal services are performed in accordance with the Uniform Standards of Professional Appraisal Practice (USPAP); and
- Maintaining, at a minimum, each of the following records for each service request:
  - The date of receipt of the request;
  - The name of the person from whom the request was received;
  - The name of the client for whom the request was made, if different from the name of the person from whom the request was received;
  - The appraiser or appraisers assigned to perform the contracted service; and
  - The date of delivery of the appraisal product to the client.

I also certify under penalty of perjury in accordance with California law as to the following regarding service of process on \_\_\_\_\_ (name of AMC).

- That service of process on \_\_\_\_\_ (name of AMC) shall be deemed service of process on each and every Controlling Person individually (as identified by Applicant herein and/or as updated by Appraisal Management Company Change Notification and Miscellaneous Requests Form REA 5011 (New 09/01/10)) as consistent with the duties and obligations of a Controlling Person within \_\_\_\_\_ (name of AMC).
- That the Applicant hereby irrevocably consents that if in any action commenced against it by the Director of the Office of Real Estate Appraisers or his designee, service of process upon it cannot be made in California after the exercise of due diligence, a valid service may thereupon be made upon it by delivering the process to the Director of the Office of Real Estate Appraisers of the State of California.
- That following such service of process pursuant to the irrevocable consent authorized herein, the Director of the Office of Real Estate Appraisers of the State of California may mail a copy of any such process to the \_\_\_\_\_ (name of AMC) at the following address:

Address

City

State

Zip Code

Executed this \_\_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_ (city or county)  
\_\_\_\_\_ (state)

Signature \_\_\_\_\_

Name (please print) \_\_\_\_\_



### Part III: Change and Request Declaration

*All changes made should be verified by, and held accountable to the Designated Officer of the AMC.*

*The Designated Officer (or new Designated Officer) must complete this section.*

I \_\_\_\_\_ (name), certify under penalty of perjury in accordance with California law that I am the Designated Officer and duly authorized as such and understand and agree, individually and on behalf of \_\_\_\_\_ (name of AMC), that the foregoing information and information provided on all attachments is true and correct and that I have answered each question fully and truthfully and without any purpose of evasion or mental reservation. I understand that providing false information is grounds for denial or revocation of any license and may subject me to disciplinary action and/or criminal prosecution and punishment by imprisonment in state prison for 2, 3 or 4 years.

Executed this \_\_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_ (city or county) \_\_\_\_\_ (state).

Signature \_\_\_\_\_

Name (please print) \_\_\_\_\_

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_  
On this \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_ before me \_\_\_\_\_ personally appeared \_\_\_\_\_ personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to this instrument and acknowledged that he/she executed it.

\_\_\_\_\_  
Signature of Notary Public

**MUST BE SIGNED AND CERTIFIED BY A NOTARY PUBLIC IF EXECUTED OUTSIDE THE STATE OF CALIFORNIA**

PLEASE READ THE FOLLOWING INFORMATION BEFORE COMPLETING THIS APPLICATION

- Do not write in the shaded area
- Type or print clearly in blue or black ink.
- Applications must be legible and contain an original signature
- If you have any questions, please write to the address listed on this page or call (916) 552 - 9000.
- Check the appropriate "change" box on page one of this form.
- Check all boxes that are applicable.

- Complete all information requested for each box checked.
- All fees must be paid by pre-printed personal check, company check, cashier's check, certified check, money order, or government purchase order.
- Fees cannot be refunded. By statute all fees submitted are deemed earned upon receipt.
- Mail completed Applications to:

OFFICE OF REAL ESTATE APPRAISERS  
1102 Q Street, Suite 4100  
Sacramento, CA 95811

INSTRUCTIONS

**PART I: AMC INFORMATION** -- This section MUST be completed.

**PART II: INFORMATION TO BE CHANGED** -- Only complete the sections in Part II that are to be changed.

**A. AMC CHANGES** -- This section includes changes in the AMC, such as changes in address or a change in Agent for Service of Process.

**1. CHANGES TO AMC INFORMATION** -- For changes in the AMC such as address, phone number, or legal formation.

**2. CHANGE FOR AGENT FOR SERVICE OF PROCESS** -- A change of, or changes to an AMC's Agent for Service of Process MUST be notarized by a Notary Public.

**B. CONTROLLING PERSON(S) CHANGES** -- This section covers changes to the Controlling Persons of an AMC.

**1. ADDITION AND REMOVAL OF CONTROLLING PERSON(S)** -- List each name of all "Controlling Persons" of the AMC that are being either added or removed to the AMC.

A separate "Appraisal Management Company (AMC) Controlling Person Application" (REA 5002 Rev 09/01/10) form and fees must be included for each Controlling Person that is being added unless:

- (a) OREA has an approved Form REA 5002 on file for the newly designated Controlling Person; or
- (b) The new Controlling Person holds an active real estate appraisal license with the OREA.

**2. INFORMATION CHANGE FOR AN EXISTING CONTROLLING PERSON** -- Show all changes being made to information for an individual Controlling Person.

**C. CHANGE OF DESIGNATED OFFICER** -- List the name of the new Designated Officer.

A separate "Appraisal Management Company (AMC) Controlling Person Application" (REA 5002 Rev 09/01/10) form and fees must be included for a Designated Officer that is being added unless:

- (a) OREA has an approved Form REA 5002 on file for the newly designated Controlling Person; or
- (b) The new Controlling Person holds an active real estate appraisal license with the OREA.

**PART III, CHANGE AND REQUEST DECLARATION** -- All changes made should be verified by, and held accountable to the Designated Officer of the AMC. The Designated Officer (or new Designated Officer) MUST complete this section.



OREA USE ONLY		TYPE REMI	
mis fees	<input type="checkbox"/> cc	<input type="checkbox"/> pc	
	<input type="checkbox"/> mo	<input type="checkbox"/> bc	
	<input type="checkbox"/> po		

## CHANGE NOTIFICATION AND MISCELLANEOUS REQUESTS

*Read All Directions on the Reverse Side Prior to Completing this Form.*

<b>1. Type of Change</b>			
<input type="checkbox"/> Name \$10 fee	<input type="checkbox"/> Physical Residence Address	<input type="checkbox"/> Issue Duplicate License \$50 fee	
<input type="checkbox"/> Business Name \$10 fee	<input type="checkbox"/> Business Telephone Number	<input type="checkbox"/> Issue Certificate of Good Standing \$15 fee	
<input type="checkbox"/> Business Address	<input type="checkbox"/> Residence Telephone Number	<input type="checkbox"/> Issue Letter of License History \$40 fee	
<input type="checkbox"/> Mailing Address	<input type="checkbox"/> Duplicate Admission Letter \$10 fee		
<b>2. License Identification Number</b>		<b>3. Expiration Date</b>	<b>4. Social Security Number</b>
<b>5. Name (as it appears on current license)</b>			
Last		First	Middle
<b>6. New Name</b>			
Last		First	Middle
<b>7. New Business Name and Address of Record (Do not list a P.O. Box, Rural Route, or Star Route)</b>			
Name of Business		Number, Street and Suite Number	
City	County	State	Zip Code
<b>8. New Mailing Address</b>			
Number, Street and Suite Number			
City	County	State	Zip Code
<b>9. New Physical Home Address (Do not list a P.O. Box, Rural Route, or Star Route)</b>			
Number, Street and Suite Number			
City	County	State	Zip Code
<b>10. New Business Telephone Number</b>		<b>11. New Residence Telephone Number</b>	
( )		( )	

I, \_\_\_\_\_ (name), declare under penalty of perjury that the foregoing information and information provided on all attachments is correct and that I have answered each question fully and truthfully and without any purpose of evasion or mental reservation. I understand that providing false information is grounds for denial or revocation of any license and may subject me to criminal prosecution and punishment by imprisonment in state prison for 2, 3 or 4 years.

Executed this \_\_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_ (city or county) \_\_\_\_\_ (state).

Signature \_\_\_\_\_

Name (please print) \_\_\_\_\_

**MUST BE SIGNED BEFORE AND CERTIFIED BY A NOTARY PUBLIC IF EXECUTED OUTSIDE THE STATE OF CALIFORNIA**

**FOR OREA USE ONLY**

Sig:  
F/L:  
Response:  
By:

Date:

Comments:

**READ THE FOLLOWING INFORMATION BEFORE COMPLETING THIS APPLICATION**

Do not write in shaded area.

- Type or print clearly in blue or black ink.
- Applications must be legible and contain an original signature.
- If you have any questions, please write to the address listed on this page or call (916) 263-0722.
- Check the appropriate "change" box on page one of this form.
- All out-of-state addresses require a completed and notarized *Consent to Service of Process* (REA 3006).

- Check all boxes that are applicable.
- Complete all information requested for each box checked.
- All fees must be paid by pre-printed personal check, company check, cashier's check, certified check, money order, or government purchase order.
- Fees cannot be refunded. By statute, all fees submitted are deemed earned upon receipt.
- Mail completed applications to:

**OFFICE OF REAL ESTATE APPRAISERS**  
1755 Creekside Oaks Drive, Suite 190  
Sacramento, CA 95833

**INSTRUCTIONS**

**NAME CHANGE--**Complete items 1 through 6. Legal documentation, such as a copy of a court order, supporting your name change is required. A copy of a driver's license or social security card is NOT acceptable. Submit the appropriate fee. If a new certificate is desired, mark the box and submit the appropriate duplicate license fee in addition to the name change fee, and return your current certificate.

**BUSINESS NAME OR EMPLOYER CHANGE--**Complete items 1 through 5 and item 7. Submit the appropriate fee. Please Note: Your business name and employer name are public record.

**BUSINESS ADDRESS OF RECORD CHANGE--**Complete items 1 through 5 and item 7. This must be a physical address. The business address of record is mandatory information. If a physical address is not available, indicate the physical location (i.e., the nearest intersection and distance from it). If a business address is not available your physical residence address may be provided. Please Note: Your business address is public record.

**MAILING ADDRESS CHANGE--**Complete items 1 through 5 and item 8. Please Note: Your Mailing address is public record.

**PHYSICAL RESIDENCE ADDRESS CHANGE--**Complete items 1 through 5 and item 9. This must be a physical address. If a physical address is not available, indicate the physical location (i.e., the nearest intersection and distance from it).

**BUSINESS TELEPHONE NUMBER CHANGE--**Complete items 1 through 5 and item 10. Please Note: Your business telephone number is public record.

**RESIDENCE TELEPHONE NUMBER CHANGE--**Complete items 1 through 5 and item 11.

**DUPLICATE ADMISSION LETTER--**The original letter issued by OREA must have been lost or destroyed. In the event the original is subsequently located it must be immediately returned. The duplicate admission letter will contain the same expiration date as the original. Submit appropriate fees.

**DUPLICATE LICENSE REQUEST--**The original certificate issued by OREA must have been lost or destroyed. In the event the original is subsequently located it must be immediately returned. Complete items 1 through 5. Submit appropriate fees.

**CERTIFICATE OF GOOD STANDING REQUEST--**Complete items 1 through 5. Submit the appropriate fees.

**LETTER OF LICENSE HISTORY REQUEST--**Complete items 1 through 5. Submit the appropriate fees.

**SOCIAL SECURITY NUMBER--**Your social security number is mandatory. OREA cannot issue licenses without a social security number issued by the U.S. Social Security Administration (Business and Professions Code Section 11340)



## UPGRADE APPLICATION

*Read All Directions on the Reverse Side Prior to Completing This Application*

### PART A

<b>1. Current License Level</b>			
<input type="checkbox"/> Provisional License	<input type="checkbox"/> Trainee License	<input type="checkbox"/> Residential License	<input type="checkbox"/> Certified Residential
<b>2. Level of Upgraded Application</b>			
<input type="checkbox"/> Trainee License	<input type="checkbox"/> Residential License	<input type="checkbox"/> Certified Residential	<input type="checkbox"/> Certified General
<b>3. Current License Number</b>			
License Number		Expiration Date	
<b>4. Name as it Appears on License</b>			
Last		First	Middle
<b>5. Business Name and Address of Record (Do not list a P.O. Box, Rural Route or Star Route)</b> <input type="checkbox"/> Check if Change			
Name of Business		Street and Suite Number	
City	County	State	Zip Code
<b>6. Mailing Address</b> <input type="checkbox"/> Check if Change			
Number, Street and Suite Number			
City	County	State	Zip Code
<b>7. Physical Home Address (Do not list a P.O. Box, Rural Route or Star Route)</b> <input type="checkbox"/> Check if Change			
Number, Street and Suite Number			
City	County	State	Zip Code
<b>8. Business Telephone Number</b>		<b>9. Home Telephone Number</b>	
( )		( )	

I, \_\_\_\_\_ (name), declare under penalty of perjury that the foregoing information and information provided on all attachments is true and correct and that I have answered each question fully and truthfully and without any purpose of evasion or mental reservation. I understand that providing false information is grounds for denial or revocation of any license and may subject me to disciplinary action and/or criminal prosecution and punishment by imprisonment in state prison for 2, 3 or 4 years.

Executed this \_\_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_ (city or county) \_\_\_\_\_ (state).

Signature \_\_\_\_\_

Name (please print) \_\_\_\_\_

MUST BE SIGNED BEFORE AND CERTIFIED BY A NOTARY PUBLIC IF EXECUTED OUTSIDE THE STATE OF CALIFORNIA

CE Complete	Y	N
Orig Sig	Y	F/L
Address Change	Y	N
Ext	Y	N

Comments:

FOR OREA USE ONLY

Lic Renewed

By

Date

## PART B-APPLICANT BACKGROUND INFORMATION

### INSTRUCTIONS

- YOU MUST ANSWER EACH OF THE FOLLOWING QUESTIONS BY WRITING "YES" OR "NO", WHICHEVER IS TRUE, AFTER EACH QUESTION.
- ALL "YES" ANSWERS MUST BE EXPLAINED ON A SEPARATE SHEET OF PAPER WHICH YOU MUST ATTACH.
- FAILURE TO ANSWER ALL QUESTIONS OR FAILURE TO ANSWER ANY QUESTION TRUTHFULLY MAY RESULT IN THE DELAY OR DENIAL OF YOUR APPLICATION.
- PROVIDING FALSE INFORMATION MAY ALSO SUBJECT YOU TO DISCIPLINARY ACTION OR CRIMINAL PROSECUTION

1. Have you ever used or been known by any name other than, or in addition to, the name listed on the reverse side of this application? If yes, list all such other names.

Applicant's answer \_\_\_\_\_

2. Have you resided outside the State of California at any time during the past 5 years? If yes, list all addresses at which you resided outside of California during this period.

Applicant's answer \_\_\_\_\_

3. Have you ever been convicted in California or anywhere else of a criminal offense other than a minor traffic offense? If yes, please indicate all such offenses including the date and location of conviction. For purposes of this question, a minor traffic offense is one in which the maximum fine which could have been imposed is \$100 or less.

To expedite review of your application, please attach a copy of the police report and a certified copy of the court docket, complaint or judgement showing the final disposition (sentence) of the case.

NOTE: Termination of probation and dismissal of the matter pursuant to Penal Code Section 1203.4 does not relieve you of the requirement to disclose any conviction when applying for a license issued by the Office of Real Estate Appraisers.

Applicant's answer \_\_\_\_\_

4. Are you now or have you ever been placed on probation or parole on terms which restricted or limited your contact or dealings with a financial or real estate related activity or business or otherwise restricted your acting in a fiduciary capacity?

To expedite review of your application, please attach a certified copy of the court records, including the complaint, complete docket, judgement and sentence, and probation report and attach a copy of the police report(s) and/or investigating agency records.

Applicant's answer \_\_\_\_\_

5. Have you ever been prohibited from participating in the affairs of any insured depository institution pursuant to Section 19(a) of the Federal Deposit Insurance Act?

Applicant's answer \_\_\_\_\_

6. Do you presently have criminal charges pending before any court of law? If so, please specify the court in which the matter is pending, the case number and charges and submit a copy of the police report, and a certified copy of the complaint and docket.

Applicant's answer \_\_\_\_\_

7. Do you currently hold a professional or vocational license issued by any other governmental agency? If yes, please identify the license held, the license number and the issuing agency.

Applicant's answer \_\_\_\_\_

8. Have you ever been disciplined or had a penalty imposed by any governmental agency, including OREA, with respect to your acting as a licensee of that agency? Attach a copy of the police report(s) and/or investigating agency records.

Applicant's answer \_\_\_\_\_



**READ THE FOLLOWING INFORMATION PRIOR TO COMPLETING THIS FORM**

**FEES**

**Upgrade to Certified Levels**

Application Review                      \$150

**NOTE:** Upgrades from either the Trainee License or Residential License to the Certified levels are required to pay examination fees directly to the test center at the time of examination. In addition, a \$75 Issuance fee and \$10 Child Support Review Fee must be submitted after successfully passing the examination.

**Upgrade to Residential License**

Application Review	\$ 150
Federal Registry (per year)	\$ 25*
Federal Registry State Processing	\$ 25
Child Support Review Fee	\$ 10
<b>Total</b>	<b>\$ 220</b>

\* The Federal Registry fee for Trainee License holders upgrading to a Residential License is \$25 per year or part thereof for the remaining term of the Trainee License, plus a \$25 state processing fee.

**OFFICE OF REAL ESTATE APPRAISERS**  
**1755 Creekside Oaks Drive, Suite 190**  
**Sacramento, CA 95833**

**INSTRUCTIONS-PART A**

**1. CURRENT LICENSE LEVEL--**The level of the license your currently hold.

**2. LEVEL OF UPGRADE APPLICATION--**Mark the level for which you wish to upgrade your application.

**3. CURRENT LICENSE NUMBER--**The license number and expiration date of your current license.

**4. NAME AS IT APPEARS ON LICENSE--**Your name as it appears on your current license.

**5. BUSINESS NAME AND ADDRESS OF RECORD--**The name of your business or your employer name. The business address of record is mandatory information. Do not list a P.O. Box Rural Route or Star Route. If a physical address is not available, indicate the physical location (i.e., the nearest intersection and distance from it). If a business address is not available your physical residence address may be provided. Please Note: The information provided is public record. If this is a change of address, mark the appropriate box.

**6. MAILING ADDRESS OF RECORD--**Your mailing address. If this is a change of address, mark the appropriate box. Information provided is public record.

**7. PHYSICAL HOME ADDRESS--**The physical location of your home address. Do not list a P.O. Box Rural Route or Star Route. If physical address is not available, indicate the physical location (i.e. the nearest intersection and distance from it).

**8. BUSINESS TELEPHONE NUMBER--**Your business telephone number. Information provided is public record.

**9. HOME TELEPHONE NUMBER--**Your home telephone number.



## RENEWAL APPLICATION

### PART A

Read All Directions on the Reverse Side Prior to Completing This Application.

<b>1. Type of Application</b>			
<input type="checkbox"/> Trainee License	<input type="checkbox"/> Residential License	<input type="checkbox"/> Certified Residential	<input type="checkbox"/> Certified General
<b>2. Current License Number</b>			
License Number		Expiration Date	
<b>3. Name as it Appears on Current License</b>			
Last		First	Middle
<b>4. Social Security Number</b>		<b>5. Birthdate</b>	
<b>6. Business Name and Address of Record (Do not list a P.O. Box, Rural Route or Star Route)</b> <input type="checkbox"/> Check if Change			
Name of Business		Street and Suite Number	
City	County	State	Zip Code
<b>7. Mailing Address</b> <input type="checkbox"/> Check if Change			
Number, Street and Suite Number			
City	County	State	Zip Code
<b>8. Physical Home Address</b> (Do not list a P.O. Box, Rural Route or Star Route) <input type="checkbox"/> Check if Change			
Number, Street and Suite Number			
City	County	State	Zip Code
<b>9. Business Telephone Number</b>		<b>10. Home Telephone Number</b>	
( )		( )	

I, \_\_\_\_\_ (name), declare under penalty of perjury that the foregoing information and information provided on all attachments is true and correct and that I have answered each question fully and truthfully and without any purpose of evasion or mental reservation. I understand that providing false information is grounds for denial or revocation of any license and may subject me to disciplinary action and/or criminal prosecution and punishment by imprisonment in state prison for 2, 3 or 4 years.

Executed this \_\_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_ (city or county) \_\_\_\_\_ (state).

Signature \_\_\_\_\_

Name (please print) \_\_\_\_\_

**MUST BE SIGNED BEFORE AND CERTIFIED BY A NOTARY PUBLIC IF EXECUTED OUTSIDE THE STATE OF CALIFORNIA**

CE Complete	Y	N	Comments:	FOR OREA USE ONLY		
Orig Sig	Y	F/L				
Address Change	Y	N				
Ext	Y	N				
Lic Renewed					By	Date



## PART B-APPLICANT BACKGROUND INFORMATION

### INSTRUCTIONS

- YOU MUST ANSWER EACH OF THE FOLLOWING QUESTIONS BY WRITING "YES" OR "NO", WHICHEVER IS TRUE, AFTER EACH QUESTION.
- ALL "YES" ANSWERS MUST BE EXPLAINED ON A SEPARATE SHEET OF PAPER WHICH YOU MUST ATTACH.
- FAILURE TO ANSWER ALL QUESTIONS OR FAILURE TO ANSWER ANY QUESTION TRUTHFULLY MAY RESULT IN THE DELAY OR DENIAL OF YOUR APPLICATION.
- PROVIDING FALSE INFORMATION MAY ALSO SUBJECT YOU TO DISCIPLINARY ACTION OR CRIMINAL PROSECUTION

1. Have you ever used or been known by any name other than, or in addition to, the name listed on the reverse side of this application? If yes, list all such other names.

Applicant's answer \_\_\_\_\_

2. Have you resided outside the State of California at any time during the past 5 years? If yes, list all addresses at which you resided outside of California during this period.

Applicant's answer \_\_\_\_\_

3. Have you ever been convicted in California or anywhere else of a criminal offense other than a minor traffic offense? If yes, please indicate all such offenses including the date and location of conviction. For purposes of this question, a minor traffic offense is one for which the maximum fine which could have been imposed is \$100 or less.

To expedite review of your application, please attach a copy of the police report and a certified copy of the court docket, complaint and judgement showing the final disposition (sentence) of the case.

**NOTE:** Termination of probation and dismissal of the matter pursuant to Penal Code Section 1203.4 does not relieve you of the requirement to disclose any conviction when applying for a license issued by the Office of Real Estate Appraisers.

Applicant's answer \_\_\_\_\_

4. Are you now or have you ever been placed on probation or parole on terms which restricted or limited your contact or dealings with any financial or real estate related activity or business or otherwise restricted your acting in a fiduciary capacity?

To expedite review of your application, please attach a certified copy of the court records, including the complaint, complete docket, judgement and sentence, and probation report and attach a copy of the police report(s) and/or investigating agency records.

Applicant's answer \_\_\_\_\_

5. Have you ever been prohibited from participating in the affairs of any insured depository institution pursuant to Section 19(a) of the Federal Deposit Insurance Act?

Applicant's answer \_\_\_\_\_

6. Do you presently have criminal charges pending before any court of law? If so, please specify the court in which the matter is pending, the case number and charges and submit a copy of the police report, and a certified copy of the complaint and docket.

Applicant's answer \_\_\_\_\_

7. Do you currently hold a professional or vocational license issued by any other governmental agency? If yes, please identify the license held, the license number and the issuing agency.

Applicant's answer \_\_\_\_\_

8. Have you ever been disciplined or had a penalty imposed by any governmental agency, including OREA, with respect to your activities as a licensee of that agency? Attach a copy of the police report(s) and/or investigating agency records.

Applicant's answer \_\_\_\_\_

Do not write in the shaded areas.

Type or print clearly in blue or black ink.

Photocopies of completed forms are not acceptable.

All fees must be paid by pre-printed personal check, company check, cashier's check, certified check, money order or government purchase order.

Fees cannot be refunded. By statute, all fees submitted are deemed earned upon receipt.

Out-of-state addresses require a completed and notarized *Consent to Service of Process* (REA 3006).

Submit copies of continuing education completion certificates with this form.

All continuing education submitted must include a minimum of 7 hours on USMAP and the 4 hour course on federal and state laws and regulations.

**NOTE:** A signed federal and state laws and regulations certification may be submitted in lieu of the submitting proof of successful completion of *Federal and State Laws and Regulation*. However, the certification does not represent a 4-hour credit towards continuing education. It merely replaces the requirement of course attendance.

**NOTE:** Applicants who submit their application after their license expiration date will be required to submit an additional 7 hours of continuing education for each 6 month period their application is received late.

Sign and date this form prior to submittal.

If you have any questions, please write to the address listed below or call (916) 263-0722.

Mail completed applications, fees and required documents to:

**OFFICE OF REAL ESTATE APPRAISERS**  
1755 Creekside Oaks Drive, Suite 190  
Sacramento, CA 95833

**FEES**

**Trainee License**

Renewal Application	\$150
Renewal Issuance	\$300
Child Support Review	\$ 10
<b>Total Renewal Fees</b>	<b>\$460</b>

**Residential License**

Renewal Application	\$150
Renewal Issuance*	\$375
Child Support Review	\$ 10
<b>Total Renewal Fees</b>	<b>\$535</b>

**Certified Residential and Certified General**

Renewal Application	\$150
Renewal Issuance*	\$450
Child Support Review	\$ 10
<b>Total Renewal Fees</b>	<b>\$610</b>

\* Includes \$75 federal registry and state processing fees.

Activities which require a real estate appraisers license cannot be conducted after the expiration date of a license. Failure to renew a license within 1 year of the expiration date will require the submittal of a new *Initial Application* (REA 3001), application review, examination and issuance fees, all current qualifying material, re-testing and must meet all requirements for new licensees.

**LATE RENEWAL FEES**

In addition to the fees listed above, applicants who submit their renewal application after their license expiration date will be required to pay the following penalty:

0 - less than 12 months late      \$125

**INSTRUCTIONS-PART A**

**1. TYPE OF APPLICATION--**Mark the box for the license type you are renewing.

**2. CURRENT LICENSE NUMBER--**The license number and expiration date of your current license.

**3. NAME AS IT APPEARS ON LICENSE--**Your name as it appears on your current license.

**4. SOCIAL SECURITY NUMBER--**Your social security number is mandatory. OREA cannot issue licenses without a social security number issued by the U.S. Social Security Administration (Business and Professions Code Section 11340).

**5. BIRTHDATE--**Your date of birth (mm/dd/yy).

**5. BUSINESS NAME AND ADDRESS OF RECORD--**The name of your business or employer name. The business address of record is mandatory information. Do not list a P.O. Box, Rural Route or Star Route. If a physical address is not available, indicate the physical location (i.e., the nearest intersection and distance from it). If a business address is not available your physical residence address may be provided. Please Note: Information required is public record. If this is a change of address, mark the appropriate box.

**6. MAILING ADDRESS OF RECORD--**Your mailing address. If this is change of address, mark the appropriate box. Information required is public record.

**7. PHYSICAL HOME ADDRESS--**The physical location of your home address. Do not list a P.O. Box, Rural Route or Star Route. If a physical address is not available, indicate the physical location (i.e., the nearest intersection and distance from it).

**8. BUSINESS TELEPHONE NUMBER--**Your business telephone number. Information required is public record.

**9. HOME TELEPHONE NUMBER--**Your home telephone number.